#### Case 18-11936 Doc 1 Filed 04/24/18 Entered 04/24/18 14:34:01 Desc Main Document Page 1 of 64

| Fill in this information to identify your case: |                               |  |                     |
|---|-------------------------------|--|---------------------|
| United States Bankruptcy Court for the:         |                               |  |                     |
| Northern District of: Illinois (State)          | <u></u>                       |  |                     |
| Case number (if known)                          | Chapter you are filing under: |  |                     |
|   | ✓ Chapter 7                   |  |                     |
|   | Chapter 11                    |  |                     |
|   | Chapter 12                    |  | Check if this is an |
|   | Chapter 13                    |  | amended filing      |

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself                                   |                            |   |
|---|----------------------------|---|
|   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name  | Georgia                    |   |
|   | First name                 | First name                                    |
| Write the name that is on your government-issued            |                            |   |
| picture identification (for                                 | Middle name                | Middle name                                   |
| example, your driver's                                      | James                      |   |
| license or passport   | Last name                  | Last name                                     |
| Bring your picture  | 0.65.40.1.11.110           | 0.6. (0. 1. 11.11)                            |
| identification to your meeting with the trustee.            | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
|   |                            |   |
| 2. All other names you have used in the last                | First name                 | First name                                    |
| 8 years   | The thane                  | The thank                                     |
| _   | Middle name                | Middle name                                   |
| Include your married or maiden names.                       |                            |   |
| maidon names.   | Last name                  | Last name                                     |
|   |                            |   |
|   | First name                 | First name                                    |
|   | A.C. J. II                 | NE LU   |
|   | Middle name                | Middle name                                   |
|   | Last name                  | Last name                                     |
|   |                            |   |
| <ol><li>Only the last 4 digits<br/>of your Social</li></ol> | XXX - XX- 1482             | XXX - XX-                                     |
| Security number or  | OR                         | OR  |
| federal İndividual<br>Taxpayer                              |                            |   |
| Identification number                                       | 9 xx - xx-                 | 9 xx - xx-                                    |
| (ITIN)  |                            |   |

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| Debtor 1 Georgia                                     | James  | Case number (if known)   |
|--|--|--|
| First Name   | Middle Name Last Name  |  |
|  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
| Any business names<br>and Employer<br>Identification | I have not used any business names or EINs.  | I have not used any business names or EINs.  |
| Numbers (EIN) you have used in the last              | Business name  | Business name  |
| 8 years Include trade names and                      | Business name  | Business name  |
| doing business as names                              | EIN  | EIN  |
|  | EIN  | EIN  |
| 5. Where you live                                    |  | If Debtor 2 lives at a different address:  |
|  | 4 Pleasant St.   |  |
|  | Number Street  | Number Street  |
|  | Apt. G   |  |
|  |  |  |
|  | Oak Park Illinois 60302  |  |
|  | City State Zip Code  | City State Zip Code  |
|  | Cools  |  |
|  | Cook<br>County   | County   |
|  | •  |  |
|  | If your mailing address is different from the one  | If Debtor 2's mailing address is different from yours,   |
|  | above, fill it in here. Note that the court will send any  | <b>fill it in here.</b> Note that the court will send any notices to   |
|  | notices to you at this mailing address.  | this mailing address.  |
|  |  |  |
|  | Number Street  | Number Street  |
|  |  |  |
|  | City State Zip Code  | City State Zip Code  |
| 6. Why you are                                       | Check one:   | Check one:   |
| choosing this district to file for bankruptcy        | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
|  |  |  |
|  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|  |  |  |
|  |  |  |
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|  |  |  |

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| De  | ebtor 1 Georgia   |  | James   | Case number (if knd  | wn)  |
|-----|---|--|---|--|--|
|     | First Name  | Middle Name  | Last Name   |  |  |
| Pa  | Tell the Court Abo  | ut Your Bankruptcy Ca  | 1SE   |  |  |
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under  |  | description of each, see <i>Notice Rec</i><br>D)). Also, go to the top of page 1 and  |  |  |
| 8.  | How you will pay the fee  | more details about he cashier's check, or may pay with a cred  I need to pay the feal Individuals to Pay Y  I request that my feal in the official poverty by you choose this optimize the cashies of the optimize  the opti | how you may pay. Typically, if y money order. If your attorney is dit card or check with a pre-print ee in installments. If you choos your Filing Fee in Installments (Cee be waived (You may request ot required to, waive your fee, ar line that applies to your family s | ou are paying the submitting your sed address. e this option, sign official Form 103 this option only and may do so onlize and you are used. | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A).  If you are filing for Chapter 7. By law, a y if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | V No.  Yes. District  District  District   | When  | MM / DD / YYYY   | Case number  Case number  Case number  |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District   | Wher<br>Wher  | MM / DD / YYYY   | Relationship to you  Case number, if known  Relationship to you  Case number, if known   |
| 11. | Do you rent your residence?   | ✓ No. Go to  | ord obtained an eviction judgment a<br>line 12.<br>t <i>Initial Statement About an Eviction</i><br>ankruptcy petition.  |  | et You (Form 101A) and file it with  |

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Debtor 1 Georgia James Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Georgia James Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Georgia James Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded □ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Georgia James Signature of Debtor 1 Signature of Debtor 2 Executed on \_\_4/24/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Georgia                                 | NO. 1 II. NO.              | James                  | Case number (if          | known)  |
|--|----------------------------|------------------------|--------------------------|---|
| First Name                                       | Middle Name                | Last Name              |                          |   |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12, | or 13 of title 11, Unite | nave informed the debtor(s) about<br>d States Code, and have explained the<br>also certify that I have delivered to the |
| If you are not                                   |                            | -                      |                          | which § 707(b)(4)(D) applies, certify that I  |
| represented by an                                |                            | -                      |                          | dules filed with the petition is incorrect.   |
| attorney, you do not                             | 40                         |                        |                          |   |
| need to file this page.                          | /s/ Jeremy Nevel           |                        | Date _                   | 4/24/2018   |
|  | Signature of Attorney f    | or Debtor              |                          | IM / DD / YYYY  |
|  |                            |                        |                          |   |
|  | Jeremy Nevel               |                        |                          |   |
|  | Printed name               |                        |                          |   |
|  | 0 11 5                     |                        |                          |   |
|  | Semrad Law Firm            |                        |                          |   |
|  | Firm name                  |                        |                          |   |
|  | 20 S. Clark Street         |                        |                          |   |
|  | Street                     |                        |                          |   |
|  | 28th Floor                 |                        |                          |   |
|  |                            |                        |                          |   |
|  | Chicago                    |                        | Illinois                 | 60603   |
|  | City                       |                        | State                    | Zip Code  |
|  | Contact phone              | 3124473707             | Email address            | inevel@semradlaw.com  |
|  |                            |                        | Liliali audiess          | Jue vei @ Seilli aula w. Colli  |
|  |                            |                        |                          |   |
|  | Bar number                 |                        | State                    |   |

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| Fill in this information to identify your case: |                           |             |                      |   |  |  |  |
|---|---------------------------|-------------|----------------------|---|--|--|--|
| Debtor 1  | Georgia                   |             | James                |   |  |  |  |
|   | First Name                | Middle Name | Last Name            |   |  |  |  |
| Debtor 2  |                           |             |                      |   |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |   |  |  |  |
| United States E                                 | Sankruptcy Court for the: | Northern    | District of Illinois |   |  |  |  |
| Case number<br>(lf known)                       |                           |             | (State)              | — |  |  |  |

| Check if this is an |
|---------------------|
| <br>amended filing  |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|   | Your assets<br>Value of what you own      |
|---|---|
| 1. Schedule A/B: Property (Official Form 106A/B)  | Ф0.00                                     |
| 1a. Copy line 55, Total real estate, from Schedule A/B  | \$0.00                                    |
| 1b. Copy line 62, Total personal property, from Schedule A/B  | \$39,207.00                               |
| 1c. Copy line 63, Total of all property on Schedule A/B   | \$39,207.00                               |
| Part 2: Summarize Your Liabilities  |   |
|   | <b>Your liabilities</b><br>Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$39,258.00                               |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00                                    |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | \$2,028.00                                |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$41,286.00                               |
| Your total liabilities  Part 3: Summarize Your Income and Expenses  | \$41,286.00                               |
| 4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I   | \$1,098.67                                |
| 5. Schedule J: Your Expenses (Official Form 106J)   |   |
| o. Solicado S. Tear Experiess (Official Form 1000)  | \$1,226.00                                |

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Debtor 1 Georgia James Case number (if known) First Name Middle Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  $\square$ 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$462.00 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this                           | information to identify your o   | ase:   |                                   |   |   |                        |  |
|--|--|--|-----------------------------------|---|---|------------------------|--|
| Debtor 1                               | Georgia  |  |                                   | James   |   |                        |  |
| Debtor 2                               | First Name   | Middle Na  | ame                               | Last Name   |   |                        |  |
| (Spouse, if fi                         | ling) First Name   | Middle Na  | ame                               | Last Name   |   |                        |  |
| United Sta                             | ates Bankruptcy Court for the:   | Northern   |                                   | District of Illinois  |   |                        |  |
| Case num                               | ber  |  |                                   | (State)   |   |                        |  |
| Officia                                | al Form 106A/B   |  |                                   |   |   |                        | Check if this is an amended filing   |
| Sche                                   | dule A/B: Prope  | rty  |                                   |   |   |                        | 12/1   |
| category v<br>responsibl<br>write your | where you think it fits best. I<br>e for supplying correct infor<br>name and case number (if I | Be as complete ar<br>mation. If more sp<br>known). Answer ev | nd accur<br>pace is r<br>very que | set only once. If an asset fits in more<br>rate as possible. If two married peop<br>needed, attach a separate sheet to<br>stion.<br>Other Real Estate You Own or H              | ole are filing togethe<br>this form. On the top | er, both a<br>o of any | are equally  |
| 1. Do you                              |  | quitable interest i  | n any re                          | sidence, building, land, or similar p   | operty?   |                        |  |
|  | No. Go to Part 2   |  |                                   |   |   |                        |  |
| 1.1                                    | Yes. Where is the property?  Street address, if available, or                                  | other description  | Sin                               | s the property? Check all that apply. gle-family home plex or multi-unit building   | the amount of                                   | any secu               | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.   |
|  |  |  | Coi Ma                            | ndominium or cooperative<br>nufactured or mobile home   | Current value entire propert                    |                        | Current value of the portion you own?  |
|  | Number Street  City State  | Zip Code   |                                   | estment property<br>neshare   | interest (such                                  | as fee                 | of your ownership<br>simple, tenancy by<br>e estate), if known.  |
|  | ·  |  | one.  Det                         | as an interest in the property? Check<br>otor 1 only<br>otor 2 only<br>otor 1 and Debtor 2 only<br>east one of the debtors and another  |   |                        | ommunity property  |
|  |  |  |                                   | information you wish to add about t   | nis item, such as loc                           | al                     |  |
| If you                                 | own or have more than one, I   | et hara:   | proper                            | ty identification number:   |   |                        |  |
| 1.2                                    | Street address, if available, or   |  | Sin Dup                           | s the property? Check all that apply. gle-family home plex or multi-unit building ndominium or cooperative nufactured or mobile home  | the amount of                                   | any secu<br>Have Cla   | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.  Current value of the portion you own? |
|  | Number Street  City State  | Zip Code   | HŢim                              | nd<br>estment property<br>neshare<br>ner  | interest (such                                  | as fee                 | of your ownership<br>simple, tenancy by<br>e estate), if known.  |
|  |  |  | one.  Det Det Det At I            | as an interest in the property? Check<br>otor 1 only<br>otor 2 only<br>otor 1 and Debtor 2 only<br>east one of the debtors and another<br>information you wish to add about the | (see instru                                     | uctions)               | ommunity property  |

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| Debtor 1                      | Georgia<br>First Name  | Middle Name                                | James<br>Last Name  | Case numbe      | (if known)   |   |
|-------------------------------|--|--|---|-----------------|--|---|
| 1.3 Stre                      | et address, if available, or o                               |  | What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home                      | pply.           | the amount of any secu   | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| Nun                           | nber Street<br>State   | Zip Code                                   | Land Investment property Timeshare Other  | _               | Describe the nature of interest (such as fee s the entireties, or a life | imple, tenancy by   |
|                               |  |  | Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Other information you wish to add a | ther            | Check if this is co<br>(see instructions)  such as local                 | mmunity property  |
|                               | the dollar value of the pove attached for Part 1. W          | ortion you own for a<br>rite that number h | all of your entries from Part 1, inclu  | ding any entrie | s for pages  |   |
| <b>Do you ow</b><br>you own t | nat someone else drives. If<br>ns, trucks, tractors, sport u | equitable interes<br>you lease a vehicle,  | t in any vehicles, whether they are also report it on Schedule G: Executor cycles   | •               | -  |   |
| <b>✓</b> Yes 3.1              | s<br>Make<br>Model:<br>Year:                                 | Buick<br>Lacrosse<br>2010                  | Who has an interest in the propone.  Debtor 1 only  | erty? Check     | the amount of any secu   | claims or exemptions. Put used claims on Schedule D: naims Secured by Property.   |
|                               | Approximate mileage: Other information:                      | 90000                                      | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community   |                 | Current value of the entire property? \$10150.00                         | Current value of the portion you own? \$10150.00  |
| 3.2                           | Make<br>Model:<br>Year:                                      | Hyundai<br>Tucson<br>2017                  | who has an interest in the propone. Debtor 1 only   | erty? Check     | the amount of any secu   | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  |
|                               | Approximate mileage: Other information:                      | 20000                                      | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and  | d another       | Current value of the entire property?<br>\$27637.00                      | Current value of the portion you own?<br>\$27637.00   |
|                               |  |  | Check if this is community p  | property (see   |  |   |

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| ו וטוטכ | Georgia   | James Case num   | Dei (II Kriowri)   |  |
|---------|---|--|--|--|
|         | First Name M  | iddle Name Last Name   |  |  |
| 3.3     | Make Model: Year: Approximate mileage: Other information:   | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | the amount of any sector of the control of the cont | claims or exemptions. Pu<br>ured claims on Schedule L<br>aims Secured by Property.<br>Current value of the<br>portion you own? |
| 3.4     | Make  | Check if this is community property (see instructions)  Who has an interest in the property? Check   | Do not deduct secured  | claims or exemptions. Pu   |
|         | Model: Year: Approximate mileage:   | one.  Debtor 1 only  | Creditors Who Have Cla   | ured claims on Schedule Laims Secured by Property.   |
|         | Other information:  | Debtor 2 only  Debtor 1 and Debtor 2 only  | Current value of the entire property?  | Current value of the portion you own?  |
|         |   | At least one of the debtors and another  Check if this is community property (see  |  |  |
|         |   | instructions)  TVs and other recreational vehicles, other vehicles, and acounal watercraft, fishing vessels, snowmobiles, motorcycle access  | cessories  |  |
|         |   | instructions)  TVs and other recreational vehicles, other vehicles, and ac   | cessories ories  Do not deduct secured   | •  |
| Exar    | nples: Boats, trailers, motors, perso<br>No<br>Yes<br>Make  | who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 2 only  Debtor 2 only  Debtor 2 only   | cessories ories  Do not deduct secured the amount of any secu  | ured claims on <i>Schedule L</i>   |
| Exar    | nples: Boats, trailers, motors, perso  No  Yes  Make  Model: Year:  Approximate mileage:                          | who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  | Do not deduct secured the amount of any secured the actions Who Have Clause Current value of the   | ured claims on Schedule Laims Secured by Property.  Current value of the   |
| 4.1     | Make Model: Approximate mileage:  Other information:  Make Model: Year:  Approximate mileage:                     | who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this is community property (see   | Do not deduct secured the amount of any secured the amount of the entire property?  Do not deduct secured the amount of any secured the amount of an | claims or exemptions. Pured claims or exemptions.  |
| 4.1     | Make Model: Other information:  Make Model: | instructions)  TVs and other recreational vehicles, other vehicles, and act and watercraft, fishing vessels, snowmobiles, motorcycle access  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another check if this is community property (see instructions)  Who has an interest in the property? Check one. | Do not deduct secured the amount of any secured the amount of the entire property?  Do not deduct secured the amount of any secured the amount of an |  |

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Debtor 1 Georgia James Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture (bed, living room set, dresser, dinette set) \$800.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Used Electronics (2 tvs, cell phone) Yes. Describe... \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Costume Jewelry \$20.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1420.00 for Part 3. Write that number here ......

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Debtor 1 Georgia James Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$0.00 17.1. Checking account: PNC Bank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Dep | for 1 Georgia First Name                           | Middle Name   | James<br>Last Name                           | Case number (if known)                      |              |
|-----|--|---|--|---|--------------|
| 20. | Government and corp<br>Negotiable instruments      | orate bonds and other negotial include personal checks, cashiers'                 | ole and non-negotiable checks, promissory no | ites, and money orders.                     |              |
|     | _  | ents are those you cannot transfer  | to someone by signing                        | g or delivering them.                       |              |
|     | Yes. Give specific information about them          | Issuer name:  |  |   |              |
|     |  |   |  |   |              |
|     |  |   |  |   |              |
|     |  |   |  |   |              |
| 21. | Retirement or pension<br>Examples: Interests in If |   | , thrift savings accounts                    | s, or other pension or profit-sharing plans |              |
|     | <b>✓</b> No  | <b>-</b> .  | 1 29 21                                      |   |              |
|     | Yes. List each                                     | Type of account:  | Institution name:                            |   |              |
|     | account separately.                                | 401(k) or similar plan:   |  |   |              |
|     | . ,  | Pension plan:   |  |   |              |
|     |  | IRA:  |  |   |              |
|     |  | Retirement account:   |  |   |              |
|     |  | Keogh:  |  |   |              |
|     |  | Additional account:   |  |   |              |
|     |  | Additional account:   |  |   | -            |
| 22. |  | prepayments d deposits you have made so that with landlords, prepaid rent, public |  |   |              |
|     | Yes  | Electric:   |  |   |              |
|     | _  | Gas:  |  |   | <u>-</u>     |
|     |  | Heating oil:  |  |   | <del>-</del> |
|     |  | Security deposit on rental unit:  |  |   | -            |
|     |  | Prepaid rent:   |  |   | _            |
|     |  | Telephone:  |  |   | _            |
|     |  | Water:  |  |   | _            |
|     |  | Rented furniture:   |  |   | _            |
|     |  | Other:  |  |   | <del>-</del> |
| 23. | Annuities (A contract fo                           | or a periodic payment of money to   | you, either for life or for                  | r a number of years)                        | - ·          |
|     | <b>✓</b> No  |   |  |   |              |
|     | Yes  | Issuer name and description:  |  |   |              |
|     |  |   |  |   |              |
|     |  |   |  |   |              |
|     |  | <del></del>   |  |   | <del></del>  |
|     |  | -   |  |   | <del></del>  |

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| Debte | or 1 Georgia First Name Mid   | James dle Name Last Name   | Case number (if known)  |   |
|-------|---|--|---|---|
| 24.   |   | account in a qualified ABLE program, or unde   | ar a qualified state tuition program  |   |
| 24.   | 26 U.S.C. §§ 530(b)(1), 529A(b), and 5  |  | a quanneu state tutton program.   |   |
|       | ✓ No Institution name and des Yes   | scription. Separately file the records of any interest   | ts.11 U.S.C. § 521(c):  |   |
|       |   |  |   |   |
| 25.   | Trusts, equitable or future interests   | in property (other than anything listed in line  | 1), and rights or powers  |   |
|       | exercisable for your benefit  |  | , ,   |   |
|       | Yes. Describe   |  |   |   |
| 26.   |   | de secrets, and other intellectual property sites, proceeds from royalties and licensing agree | ements  |   |
|       | ✓ No  Yes. Describe   |  |   |   |
|       |   |  |   |   |
| 27.   | Licenses, franchises, and other gene<br>Examples: Building permits, exclusive licenses.   | eral intangibles<br>censes, cooperative association holdings, liquor li                        | icenses, professional licenses  |   |
|       | <b>✓</b> No   |  |   |   |
|       | Yes. Describe   |  |   |   |
|       |   |  |   |   |
|       |   |  |   |   |
| Mon   | ney or property owed to you?  |  |   | Current value of the portion you own? Do not deduct secured claims or exemptions.   |
|       | ney or property owed to you?  Tax refunds owed to you   |  |   | portion you own? Do not deduct secured  |
|       |   |  |   | portion you own? Do not deduct secured  |
|       | Tax refunds owed to you  ✓ No  ☐ Yes. Give specific information   |  | Federal:  | portion you own? Do not deduct secured  |
|       | Tax refunds owed to you  ✓ No   | r  | Federal:<br>State:  | portion you own? Do not deduct secured claims or exemptions.  |
|       | Tax refunds owed to you  ✓ No ✓ Yes. Give specific information about them, including whethe   | r  |   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whethe you already filed the returns and the tax years   | y, spousal support, child support, maintenance,  | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                      |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whethe you already filed the returns and the tax years   |  | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                      |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whethe you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimon  |  | State:<br>Local:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                      |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whethe you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimon   |  | State:  Local:  divorce settlement, property settlemen  | portion you own?  Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                     |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whethe you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimon   |  | State:  Local:  divorce settlement, property settlement  Alimony:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t                                   |
| 28.   | Tax refunds owed to you  No Yes. Give specific information about them, including whethe you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimon   |  | State:  Local:  divorce settlement, property settlement  Alimony:  Maintenance:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00                               |
| 28.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whethe you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimon  ✓ No  Yes. Give specific information   |  | State:  Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:                                       | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00               |
| 29.   | Tax refunds owed to you  Yes. Give specific information about them, including whethe you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimon  Yes. Give specific information  Other amounts someone owes you  Examples: Unpaid wages, disability insur   |  | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29.   | Tax refunds owed to you  Yes. Give specific information about them, including whethe you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimon  Yes. Give specific information  Other amounts someone owes you  Examples: Unpaid wages, disability insur   | y, spousal support, child support, maintenance,  | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29.   | Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whethe you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimon  ✓ No  Yes. Give specific information  Other amounts someone owes you  Examples: Unpaid wages, disability insur Social Security benefits; unpaid | y, spousal support, child support, maintenance,  | State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb  | tor 1 Georgia  |                         | James   | Case number (if known)                        |   |
|------|--|-------------------------|---|---|---|
|      | First Name   | Middle Name             | Last Name   |   |   |
| 31.  | Interests in insurance p<br>Examples: Health, disabili |                         | Ith savings account (HSA); credit, h                            | omeowner's, or renter's insurance             |   |
|      | Yes. Name the insura of each policy and lis            |                         | Company name:   | Beneficiary:                                  | Surrender or refund value:  |
| 32.  | Any interest in property                               |                         |   | ·   |   |
|      | If you are the beneficiary property because someon     |                         | proceeds from a life insurance policy                           | , or are currently entitled to receive        |   |
|      | No Yes. Describe                                       |                         |   |   |   |
| 33.  |  |                         | rou have filed a lawsuit or made rance claims, or rights to sue | a demand for payment                          |   |
|      | No Yes. Describe                                       |                         |   |   |   |
| 34.  | Other contingent and u                                 | nliquidated claims of   | every nature, including counterc                                | laims of the debtor and rights                |   |
|      | No Yes. Describe                                       |                         |   |   |   |
| 35.  | Any financial assets you                               | u did not already list  |   |   |   |
|      | ✓ No  Yes. Describe                                    |                         |   |   |   |
| 36.  |  | •                       | n Part 4, including any entries fo                              | . • ,   |   |
|      |  |                         |   |   |   |
| Part | _  |                         | _   | nterest In. List any real estate in Par       | rt 1.   |
| 37.  | טס you own or have any                                 | riegai or equitable int | erest in any business-related pro                               |   |   |
|      | No. Go to Part 6. Yes. Go to line 38.                  |                         |   |   | Current value of the portion you own?  Do not deduct secured claims or exemptions |
| 38.  | Accounts receivable or                                 | commissions you alre    | eady earned   |   | or exemptions   |
|      | ✓ No Yes. Describe                                     |                         |   |   |   |
| 39.  | Office equipment, furnis<br>Examples: Business-relate  |                         | , modems, printers, copiers, fax ma                             | chines, rugs, telephones, desks, chairs, elec | ctronic devices   |
|      | No Yes. Describe                                       |                         |   |   |   |
|      |  |                         |   |   |   |

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| Debto          | r 1 Georgia                      | James Case number (if know  | <i>(n</i> )                           |
|----------------|----------------------------------|---|---------------------------------------|
| 40. I          | First Name                       | Middle Name Last Name ipment, supplies you use in business, and tools of your trade |                                       |
| ١.             |                                  | pinent, supplies you use in business, and tools of your trade                       |                                       |
|                | ✓ No Yes. Describe               |   |                                       |
| '              | Too. Describe                    |   |                                       |
|                |                                  |   |                                       |
| 41. I          | nventory                         |   |                                       |
|                | <b>✓</b> No                      |   |                                       |
|                | Yes. Describe                    |   |                                       |
|                |                                  |   |                                       |
| 42. I          | nterests in partnerships         | or joint ventures   |                                       |
|                | <b>✓</b> No                      |   |                                       |
|                | Yes. Give specific               | Name of entity: % of ow   | nership:                              |
|                | information about them           |   |                                       |
|                | urom                             |   |                                       |
|                |                                  |   |                                       |
| 43. <b>C</b> ı | ustomer lists, mailing lis       | ets, or other compilations  |                                       |
|                | <b>√</b> No                      |   |                                       |
| i              |                                  | ude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?       |                                       |
|                | —<br>□ No                        |   |                                       |
|                | Yes. Describe                    | <b>3</b>  |                                       |
|                |                                  |   |                                       |
| 44.            | Any business-related pro         | pperty you did not already list   |                                       |
|                | <b>√</b> No                      |   |                                       |
|                | Yes. Give specific               |   |                                       |
|                | information                      | -   | <del></del>                           |
|                |                                  |   | <del></del>                           |
|                |                                  |   |                                       |
|                |                                  |   |                                       |
|                |                                  |   |                                       |
|                |                                  |   |                                       |
|                |                                  | of your entries from Part 5, including any entries for pages you have attached      |                                       |
| for Par<br>▶   | t 5. Write that number h         | nere  |                                       |
| Part 6         |                                  | m- and Commercial Fishing-Related Property You Own or Have an In                    | terest In.                            |
|                | If you own or have an int        | erest in farmland, list it in Part 1.   |                                       |
| 46.            | Do you own or have any           | legal or equitable interest in any farm- or commercial fishing-related property?    |                                       |
|                | No. Go to Part 7.                |   | Current value of the portion you own? |
|                | Yes. Go to line 47.              |   | Do not deduct secured claims          |
| 47             | Farm animals                     |   | or exemptions                         |
|                | <i>Examples:</i> Livestock, poul | try, farm-raised fish   |                                       |
|                | No                               |   |                                       |
|                | Yes. Describe                    |   |                                       |
| 1 '            |                                  |   |                                       |

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| Deb          | tor 1 Georgia                 | No. 1 II. No.                     | James                      | Case number (if known)         |              |
|--------------|-------------------------------|-----------------------------------|----------------------------|--------------------------------|--------------|
|              | First Name                    | Middle Name                       | Last Name                  |                                |              |
| 48.          | Crops-either growing or I     | harvested                         |                            |                                |              |
|              | <b>✓</b> No                   |                                   |                            |                                |              |
|              | Yes. Describe                 |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
| 49.          | Farm and fishing equipme      | ent, implements, machinery, fix   | tures, and tools of trade  |                                |              |
|              | <b>✓</b> No                   |                                   |                            |                                |              |
|              | Yes. Describe                 |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
| 50.          | Farm and fishing supplies     | s, chemicals, and feed            |                            |                                |              |
|              | <b>✓</b> No                   |                                   |                            |                                |              |
|              | Yes. Describe                 |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
| 51.          | Any farm- and commercia       | al fishing-related property you o | lid not already list       |                                |              |
|              | <b>✓</b> No                   |                                   |                            |                                |              |
|              | Yes. Describe                 |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
|              |                               | <del></del>                       |                            | Г                              |              |
| 52. A        | dd the dollar value of all o  | f your entries from Part 6, inclu | ding any entries for page: | s you have attached            |              |
| for P        | art 6. Write that number he   | ere                               |                            |                                |              |
|              |                               |                                   |                            | <u> </u>                       |              |
|              |                               |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
| Part         | 7: Describe All Prope         | rty You Own or Have an Int        | erest in That You Did I    | Not List Above                 |              |
| 53.          |                               | ty of any kind you did not alread | dy list?                   |                                |              |
|              | Examples: Season tickets, o   | country club membership           |                            |                                |              |
|              | <b>✓</b> No                   |                                   |                            |                                | <u> </u>     |
|              | Yes. Give specific            |                                   |                            |                                |              |
|              | information                   |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
| 54. A        | dd the dollar value of all o  | f your entries from Part 7. Write | that number here           |                                | <u> </u>     |
|              |                               |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
|              |                               |                                   |                            |                                |              |
|              |                               | . I B. I KIII E.                  |                            |                                |              |
| Part         | 8: List the Totals of E       | ach Part of this Form             |                            |                                | 1            |
| 55           | Part 1: Total real estate. li | ne 2                              |                            | <b>&gt;</b>                    |              |
| 00.          |                               |                                   |                            |                                |              |
| 56.          | part 2 total vehicles, line 5 | <b>i</b>                          | ¢27707 00                  |                                |              |
| 67 F         | out 2. Total navoonal and l   | haveahald itama line 15           | \$37787.00                 | _                              |              |
| 37.F         | Part 3: Total personal and I  | nousenoid items, line 15          | \$1420.00                  | _                              |              |
| 58. <b>F</b> | Part 4: Total financial asset | ts, line 36                       |                            |                                |              |
| 59.          | Part 5: Total business-rela   | ted property, line 45             |                            | _                              |              |
| 60           | Part 6: Total farm- and fish  | ning-related property, line 52    |                            | _                              |              |
|              |                               |                                   |                            | _                              |              |
| 61.          | Part 7: Total other propert   | y not listed, line 54             |                            | _                              |              |
| 62.          | Total personal property. Ac   | dd lines 56 through 61            | \$39207.00                 |                                | + \$39207.00 |
|              |                               |                                   | Ψ00201.00                  | Copy personal property total ► | - Ψυσευτ.υυ  |
|              |                               |                                   |                            |                                | 400007.00    |
| 63 1         | otal of all property on Sch   | edule A/B. Add line 55 + line 62  |                            |                                | \$39207.00   |
| , ∪∪.        | oral or all property on our   | Junio Albi Add III GOO T III G UZ |                            |                                | 1            |

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| Debtor Debtor (Spouse,              |  |                                     |   |   |  |  |  |  |
|-------------------------------------|--|-------------------------------------|---|---|--|--|--|--|
| Debtor                              | 1 Georgia  |                                     | James   |   |  |  |  |  |
|                                     | First Name   | Middle Name                         | Last Name   |   |  |  |  |  |
|                                     |  | Middle Name                         | Loot Nome   |   |  |  |  |  |
|                                     | i not ramo   |                                     | Last Name   |   |  |  |  |  |
| United                              | States Bankruptcy Court for the: No  | rthern D                            | vistrict of Illinois (State)  |   |  |  |  |  |
| Case nu                             |  |                                     |   |   |  |  |  |  |
| (II KIIOWII)                        | 1  |                                     |   | Check if this is an                             |  |  |  |  |
| Offic                               | cial Form 106C   |                                     |   | amended filing                                  |  |  |  |  |
| Sche                                | edule C: The Propert   | ty You Claim a                      | s Exempt  | 04/16   |  |  |  |  |
|                                     |  |                                     | le are filing together, both are equally resp   | ponsible for supplying correct                  |  |  |  |  |
|                                     |  |                                     | Property (Official Form 106A/B) as your so  |   |  |  |  |  |
|                                     |  |                                     | page as many copies of Part 2: Additional   | Page as necessary. On the top of any            |  |  |  |  |
| additio                             | nal pages, write your name and   | case number (if known               | ).  |   |  |  |  |  |
| For eac                             | ch item of property you claim a  | as exempt, you must s               | specify the amount of the exemption you   | u claim. One way of doing so is to              |  |  |  |  |
|                                     |  |                                     | u may claim the full fair market value of   |   |  |  |  |  |
|                                     |  | -                                   | tions—such as those for health aids, rig  |   |  |  |  |  |
|                                     |  |                                     | mount. However, if you claim an exemp<br>amount and the value of the property is  |   |  |  |  |  |
|                                     | xemption would be limited to the   | =                                   |   | determined to exceed that amount,               |  |  |  |  |
| ,                                   | _  |                                     | •   |   |  |  |  |  |
| Part 1:                             | Identify the Property You Cla  | aim as Exempt                       |   |   |  |  |  |  |
| 1. W                                | hich set of exemptions are you clai  | =                                   |   |   |  |  |  |  |
| ✓                                   | -  |                                     |   |   |  |  |  |  |
|                                     | You are claiming federal exempt  | ions. 11 U.S.C. § 522(b)(2          | 2)  |   |  |  |  |  |
| 2. Fo                               | ny property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.                         |                                     |   |   |  |  |  |  |
| Br                                  | rief description of the property and   | Current value of                    | Amount of the exemption you claim   | Specific laws that allow exemption              |  |  |  |  |
|                                     | ne on Schedule A/B that lists this   | the portion you                     | Check only one box for each exemption.  | ·   |  |  |  |  |
| pr                                  | operty   | own                                 | oneck only one box for each exemption.  |   |  |  |  |  |
|                                     |  | Copy the value from<br>Schedule A/B |   |   |  |  |  |  |
|                                     |  | Corrodato 772                       |   |   |  |  |  |  |
|                                     | iof  | 040.450.00                          |   |   |  |  |  |  |
| Bri                                 |  | \$10.150.00                         |   | 735 ILCS 5/12-1001(c); 735 ILCS                 |  |  |  |  |
|                                     | escription: Buick Lacrosse, 2010   | \$10,150.00                         | \$0   | 735 ILCS 5/12-1001(c); 735 ILCS<br>5/12-1001(b) |  |  |  |  |
| de                                  | escription:  | \$10,150.00                         | 100% of fair market value, up to any  |   |  |  |  |  |
| de<br>Lir                           | Buick Lacrosse, 2010 ne from chedule A/B: 03   | \$10,150.00                         | \$0   | 5/12-1001(b)<br>                                |  |  |  |  |
| Lir<br>Sc<br>Bri                    | Buick Lacrosse, 2010  ne from chedule A/B: 03  | \$10,150.00                         | 100% of fair market value, up to any applicable statutory limit   |   |  |  |  |  |
| Lir<br>Sc<br>Bri                    | Buick Lacrosse, 2010 ne from chedule A/B: 03   |                                     | 100% of fair market value, up to any applicable statutory limit  \$0  \$0  \$0  \$0  \$0  | 5/12-1001(b)<br>                                |  |  |  |  |
| Lir<br>Sc<br>Bri<br>de              | Buick Lacrosse, 2010  ne from chedule A/B: 03  ief escription: Checking account, PNC Bank                                    |                                     | 100% of fair market value, up to any applicable statutory limit  so  \$0  100% of fair market value, up to any applicable statutory limit | 5/12-1001(b)<br>                                |  |  |  |  |
| Lir<br>Sc<br>Bri<br>de              | Buick Lacrosse, 2010  ne from chedule A/B: 03  ief sscription: Checking account, PNC   |                                     | 100% of fair market value, up to any applicable statutory limit  \$0  \$0  \$0  \$0  \$0  | 5/12-1001(b)<br>                                |  |  |  |  |
| Lir<br>Sc<br>Bri<br>de              | Buick Lacrosse, 2010  The from Checking account, PNC Bank  The from Checking A/B: 17   | \$0.00                              | 100% of fair market value, up to any applicable statutory limit  \$0  100% of fair market value, up to any applicable statutory limit     | 5/12-1001(b)<br>                                |  |  |  |  |
| Lir<br>Sc<br>Bri<br>de<br>Lir<br>Sc | Buick Lacrosse, 2010  The from Checking account, PNC Bank The from Checking AB: 17  The you claiming a homestead exemptions: | \$0.00                              | 100% of fair market value, up to any applicable statutory limit  \$0  100% of fair market value, up to any applicable statutory limit     | 5/12-1001(b)<br>                                |  |  |  |  |

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Georgia James Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$400.00 description:  $\checkmark$ \$400.00 **Used Clothing** 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 11 Brief 735 ILCS 5/12-1001(b) \$800.00 description: **✓** \$800.00 Used Furniture (bed, 100% of fair market value, up to any living room set, dresser, applicable statutory limit dinette set) Line from Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief \$200.00 description:  $\overline{}$ \$200.00 Used Electronics (2 tvs, 100% of fair market value, up to any cell phone) applicable statutory limit Line from Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$20.00 description:  $\checkmark$ \$20.00 **Costume Jewelry** 

100% of fair market value, up to any

applicable statutory limit

Line from

Schedule A/B:

12

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| Fill in          | this infor            | mation to identify your ca           | se:                          |  |  |  |                          |
|------------------|-----------------------|--------------------------------------|------------------------------|--|--|--|--------------------------|
| Debto            | or 1                  | Georgia                              |                              | James  |  |  |                          |
| Debic            | , ,                   | First Name                           | Middle Name                  | Last Name  |  |  |                          |
| Debto<br>(Spous  | or 2<br>e, if filing) | First Name                           | Middle Name                  | Last Name  |  |  |                          |
| United           | d States E            | Bankruptcy Court for the:            | Northern                     | District of Illinois   |  |  |                          |
| Case<br>(If know | number                |                                      |                              | (State)  |  |  |                          |
| `                | •                     | Form 106D                            |                              |  |  |  | Check if this is a       |
|                  |                       | <del></del>                          | ore Who Hay                  | ve Claims Secure   | ad by Prop   |  | amended filing           |
|                  |                       |                                      |                              | e are filing together, both are equ                                      |  |  | 12/1                     |
| more s           | space is              | •                                    |                              | ber the entries, and attach it to t                                      | •  |  |                          |
|                  |                       | creditors have claims se             | ecured by your propert       | v?   |  |  |                          |
| Г                | -                     |                                      |                              | vith your other schedules. You hav                                       | e nothing else to rep                                  | ort on this form.                            |                          |
| i                | Yes.                  | Fill in all of the information       | n below.                     |  |  |  |                          |
| Part             | 1: List               | All Secured Claims                   |                              |  |  |  |                          |
| 2.               | List all              | secured claims. If a credit          | tor has more than one secu   | ured claim, list the creditor  | Column A   | Column B                                     | Column C                 |
|                  | •                     | •                                    | •                            | icular claim, list the other creditors order according to the creditor's | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1              |                       | AI CAPITAL AMERIC                    | Describe the property        | that secures the claim:  | \$27,583.00  | \$27,637.00                                  | \$0.00                   |
|                  | Creditor's            | Name TALBERT AVE                     | 2017 Hyundai Tucson          |  |  |  |                          |
|                  | Numb                  |                                      |                              | the claim is: Check all that apply.                                      |  |  |                          |
|                  |                       |                                      | Contingent                   |  |  |  |                          |
|                  | FOUNT/<br>VALLEY      |                                      | Unliquidated                 |  |  |  |                          |
|                  | City                  | State ZIP Code                       | Disputed                     |  |  |  |                          |
|                  |                       | ves the debt? Check one.             | Nature of lien. Check al     | ll that apply.   |  |  |                          |
|                  |                       | otor 1 only<br>otor 2 only           | An agreement you n car loan) | nade (such as mortgage or secured  |  |  |                          |
|                  | Deb                   | otor 1 and Debtor 2 only             | Statutory lien (such         | as tax lien, mechanic's lien)  |  |  |                          |
|                  | At le                 | east one of the debtors              | Judgment lien from           | a lawsuit  |  |  |                          |
|                  |                       | l another                            | Other (including a rig       | ght to offset)   |  |  |                          |
|                  |                       |                                      | Last 4 digits of accoun      | nt number 6457   |  |  |                          |
| 2.2              |                       | O FINANCE                            | Describe the property        | that secures the claim:  | \$11,675.00  | \$10,150.00                                  | \$1,525.00               |
|                  | Creditor's            |                                      | 2010 Buick Lacrosse          | that secures the claim.  |  |  |                          |
|                  | PO BO                 |                                      |                              | the claim is: Check all that apply.                                      |  |  |                          |
|                  |                       |                                      | Contingent                   |  |  |  |                          |
|                  | FARMIN                |                                      | Unliquidated                 |  |  |  |                          |
|                  | HILLS<br>City         | MI 48333<br>State ZIP Code           | Disputed                     |  |  |  |                          |
|                  |                       | ves the debt? Check one.             | Nature of lien. Check al     | ll that apply.   |  |  |                          |
|                  |                       | otor 1 only                          |                              | nade (such as mortgage or secured  |  |  |                          |
|                  |                       | otor 2 only                          | car loan)                    | as tay lian, mashaniala lian)  |  |  |                          |
|                  |                       | otor 1 and Debtor 2 only             | Judgment lien from           | as tax lien, mechanic's lien)  |  |  |                          |
|                  |                       | east one of the debtors<br>I another | Other (including a rig       |  |  |  |                          |
|                  |                       | eck if this claim relates            |                              |  |  |  |                          |
|                  | Date de incurre       |                                      | Last 4 digits of accoun      | nt number2889  |  |  |                          |
|                  |                       | Add the dollar value of y            | our entries in Column A      | on this page. Write that number  | \$39,258.00  |  |                          |

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| HIII II                                 | n this inforr  | nation to identify your c  | ase:   |   |  |   |   |  |
|---|--|--|--|---|--|---|---|--|
| Deb                                     | tor 1  | Georgia<br>First Name  | Middle Name  | James<br>Last Name  |  |   |   |  |
| Deb                                     | tor 2  | · iiot · taiiio  | madio Hamo   | 2401.144.110  |  |   |   |  |
| (Spo                                    | use, if filing)  | First Name   | Middle Name  | Last Name   |  |   |   |  |
| Unit                                    | ed States Ba   | ankruptcy Court for the:   | Northern   | District of Illinois(State)   |  |   |   |  |
| Case<br>(If knd                         | e number<br>own)   |  |  | (,  |  |   |   |  |
| Off                                     | icial Fo   | orm 106E/F   |  |   |  | Che   | eck if this is an   | n amended filing                                 |
|   |  |  | ditors Who   | Have Uns  | ecured Claims  | <b>;</b>  |   | 12/15  |
| other<br>Form<br>clain<br>the e<br>know | r party to a<br>1 106A/B) a<br>ns that are<br>entries in th<br>n). | ny executory contracts<br>nd on Schedule G: Exe<br>listed in Schedule D: C<br>ne boxes on the left. At | s or unexpired leases that<br>cutory Contracts and Uni-<br>creditors Who Hold Claims | t could result in a cla<br>expired Leases (Offic<br>s Secured by Propert    | aims and Part 2 for creditors w im. Also list executory contrac ial Form 106G). Do not include y. If more space is needed, cop he top of any additional pages, | ts on <i>Sched</i><br>any credito<br>y the Part y | <i>ule A/B: Prop</i><br>rs with partia<br>ou need, fill i | perty (Official<br>ally secured<br>t out, number |
| 1.                                      |  | editors have priority un<br>ão to Part 2.  | secured claims against y   | you?  |  |   |   |  |
| 2.                                      | listed, iden<br>As much a<br>Continuation                          | tify what type of claim it<br>is possible, list the claims<br>on Page of Part 1. If mor                | is. If a claim has both priori   | ity and nonpriority amording to the creditor's naparticular claim, list the |  | both priorit                                      | y and nonprior  | rity amounts.                                    |
|   |  |  |  |   |  | Total claim                                       | Priority amount   | Nonpriority amount                               |

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| Debto  | r 1 Georgia First Name Middle Name   | James<br>Last Name  | Case number (if known)   |                   |
|--------|--|---|--|-------------------|
| Part 2 |  |   |  |                   |
| 4. L   | nsecured claim, list the creditor separately for each claim. more than one creditor holds a particular claim, list the ot  | this form to the chapter of the habetical order of the for each claim lists | ourt with your other schedules.  If the creditor who holds each claim. If a creditor has more ed, identify what type of claim it is. Do not list claims already in the table of the table out the tabl | cluded in Part 1. |
| F      | age of Part 2.   |   |  | Total claim       |
| 4.1    | CBNA Nonpriority Creditor's Name Po Box 6497 Number Street   | w   | test 4 digits of account number 5711  then was the debt incurred? 10/2014  s of the date you file, the claim is: Check all that apply.   | \$309.00          |
|        | Sioux Falls City State Zip Co Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset?  Yes   | de C  | Contingent Unliquidated Disputed  pe of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard   |                   |
| 4.2    | COMENITY BANK/ASHSTWRT Nonpriority Creditor's Name PO BOX 182789 Number Street  COLUMBUS Ohio 43218 City State Zip Co Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt is the claim subject to offset?  Yes | de Ty   | then was the debt incurred?  12/2013  Tof the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  pe of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify  Notice only  | \$0.00            |
| 4.3    | COMENITY BANK/CARSONS  Nonpriority Creditor's Name 1314 PINELOG ROAD  Number Street  AIKEN South Carolina 29803 City State Zip Co  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  | As de C   | then was the debt incurred?  sof the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  pe of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | \$554.00          |
|        | Check if this claim relates to a community debt is the claim subject to offset?  No  Yes   | <u> </u>  | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CreditCard   |                   |

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Debtor 1 Georgia James Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 PNC BANK, N.A. \$1,165.00 Last 4 digits of account number 2179 Nonpriority Creditor's Name 1 FINANCIAL PKWY When was the debt incurred? 4/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **KALAMAZOO** Michigan 49009 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt CreditCard Other. Specify \_ Is the claim subject to offset?  $\overline{\mathbf{A}}$ **✓** No

Yes

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Debtor 1 Georgia James Case number (if known)

| First Nar                | ne Middle Name Last Name  |       |                                    |                              |  |
|--------------------------|---|-------|------------------------------------|------------------------------|--|
| Part 4: Add th           | e Amounts for Each Type of Unsecured Claim  |       |                                    |                              |  |
|                          | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.   | for s | tatistical reporting purposes only | <sup>,</sup> 28 U.S.C. §159. |  |
|                          |   |       | Total claims                       |                              |  |
| Total claims from Part 1 | 6a. Domestic support obligations.   | 6a.   | \$0.00                             |                              |  |
|                          | 6b. Taxes and certain other debts you owe the government  | 6b.   | \$0.00                             |                              |  |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.   | \$0.00                             |                              |  |
|                          | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d.   | \$0.00                             |                              |  |
|                          | 6e. Total. Add lines 6a through 6d.   | 6e.   | \$0.00                             |                              |  |
|                          |   |       | Total claims                       |                              |  |
| Total claims from Part 2 | 6f. Student loans   | 6f.   | \$0.00                             |                              |  |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.   | \$0.00                             |                              |  |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.   | \$0.00                             |                              |  |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i.   | \$2,028.00                         |                              |  |
|                          | 6j. Total. Add lines 6f through 6i.   | 6j.   | \$2,028.00                         |                              |  |

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| Fill in this infor                      | mation to identify your ca | ase:        |                      |  |
|---|----------------------------|-------------|----------------------|--|
| Debtor 1                                | Georgia                    |             | James                |  |
|   | First Name                 | Middle Name | Last Name            |  |
| Debtor 2                                |                            |             |                      |  |
| (Spouse, if filing)                     | First Name                 | Middle Name | Last Name            |  |
| United States Bankruptcy Court for the: |                            | Northern    | District of Illinois |  |
|   |                            |             | (State)              |  |
| Case number<br>(If known)               |                            |             |                      |  |

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or cor         | npany with whom you have | the contract or lease | State what the contract or lease is for                  |
|-----------------------|--------------------------|-----------------------|--|
| Oak Park Resi<br>Name | ·                        | _                     | Residential Lease,<br>Debtor is Lessee,<br>Housing Lease |
| Number<br>Oak Park    | Street<br>Illinois       | 60302                 |  |
| City                  | State                    | Zip Code              |  |

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|                         |                                       |   | DC                           | cument ray   | 20 01        | 04   |     |
|-------------------------|---------------------------------------|---|------------------------------|--|--------------|--|-----|
| Fill in                 | n this infor                          | mation to identify your c   | ase:                         |  |              |  |     |
| Debt                    | or 1                                  | Georgia<br>First Name   | Middle Name                  | James<br>Last Name                                   |              |  |     |
| Debt<br>(Spou           | or 2                                  | First Name  | Middle Name                  | Last Name  |              |  |     |
| Unite                   | ed States E                           | Bankruptcy Court for the:   | Northern                     | District of Illinois                                 |              |  |     |
| Case<br>(If kno         | number                                |   |                              | (State)  |              |  |     |
|                         | <u> </u>                              | Forms 10011   |                              |  |              | Check if this is amended filing  |     |
|                         |                                       | Form 106H<br>e H: Your Cod  | lebtors                      |  |              | 12/  | '15 |
| filing<br>the e<br>know | together,<br>ntries in t<br>n). Answe | both are equally respondence boxes on the left. At er every question.     | nsible for supplying corre   | ect information. If more<br>e to this page. On the t | space is no  | e and accurate as possible. If two married people are leeded, copy the Additional Page, fill it out, and numbe additional Pages, write your name and case number (if | r   |
|                         | Idaho, Loi<br>No.<br>Yes.             | uisiana, Nevada, New Mex<br>Go to line 3.<br>Did your spouse, forme<br>No | r spouse, or legal equiva    | ashington, and Wisconsi                              | n.)<br>time? | nity property states and territories include Arizona, California,  |     |
|                         | Ш                                     | Yes. In which communit  | y state or territory did you | ı live?  | Fill in tl   | the name and current address of that person.   |     |
|                         |                                       | Name of your spouse, f  | ormer spouse, or legal equ   | ivalent  |              |  |     |
|                         |                                       | Number Street   |                              |  |              |  |     |
|                         |                                       | City  | State                        | Zip Co   | ode          |  |     |
|                         |                                       |   | -                            | -  |              | buse is filing with you. List the person shown in line 2 and the creditor on Schedule D (Official Form 106D),  |     |

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

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| Fill in this information to   | identify your case:  |                        |   |             |          |  |  |
|---|--|------------------------|---|-------------|----------|--|--|
| Debtor 1 Georgia First Name   | Middle Name  | James<br>Last N        |   |             | Che      | eck if this is:  |  |
| Debtor 2 (Spouse, if filing) First Name                                       | Middle Name  | Last N                 | lame  |             |          | An amended filing  |  |
| United States Bankruptcy C<br>the:<br>Case number                             | Court for Northern   | District of Illi<br>(S | inois<br>State)                                     |             |          | A supplement showing post-petition chapter 10 expenses as of the following date: |  |
| (If known)  |  |                        |   |             |          | MM / DD / YYYY   |  |
| Official Form 1   | <u>06I</u>   |                        |   |             |          |  |  |
| Schedule I: Yo  | ur Income  |                        |   |             |          | 12/15  |  |
|   | needed, attach a separate sho<br>er every question.                      |                        |   |             |          | not include information about your ional pages, write your name and case         |  |
| Fill in your employment information.  |  | Debtor 1               | l   |             |          | Debtor 2   |  |
| If you have more than on attach a separate page wi information about addition | th<br>nal  |                        | <ul><li>☐ Employed</li><li>✓ Not Employed</li></ul> |             |          | Employed  Not Employed   |  |
| employers.  Include part time, season self-employed work.                     |  |                        |   |             |          |  |  |
| Occupation may include or homemaker, if it applie                             |  | Number Str             | reet  |             |          | Number Street  |  |
|   |  | City                   |   | State       | Zip Code | City State Zip Code  |  |
|   | How long employed there?   |                        |   | _           |          |  |  |
| Part 2: Give Details A  | bout Monthly Income  |                        |   |             |          |  |  |
| spouse unless you are sep   | arated.  | -                      |   |             |          | vrite \$0 in the space. Include your non-filing                                  |  |
| If you or your non-filing spo<br>more space, attach a sepa                    |  | r, combine the         | information   | n for all e |          | or that person on the lines below. If you need  For Debtor 2 or                  |  |
|   | ges, salary, and commissions (bef<br>monthly, calculate what the monthly |                        | 2.  |             | \$0.00   | non-filing spouse  |  |
| 3. Estimate and list mor  | thly overtime pay.   |                        | 3   |             | + \$0.00 |  |  |
| 4. Calculate gross incor  | ne. Add line 2 + line 3.   |                        | 4.  |             | \$0.00   |  |  |

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| Den                  | tor 1Georgia First Name Middle Name  | James<br>Last Name   | Case numb                | Jei (II                           | <u> </u>                |
|----------------------|--|----------------------|--------------------------|-----------------------------------|-------------------------|
|                      | That Name whome Name   | Lastivaine           | For Debtor 1             | For Debtor 2 or non-filing spouse |                         |
| Co                   | opy line 4 here  | <b>→</b> 4.          | \$0.00                   |                                   |                         |
| 5. <b>Li</b> :       | st all payroll deductions:   |                      |                          |                                   |                         |
| 5                    | a. Tax, Medicare, and Social Security deductions   | 5a.                  | \$0.00                   |                                   |                         |
| 5                    | b. Mandatory contributions for retirement plans  | 5b.                  | \$0.00                   |                                   |                         |
| 5                    | c. Voluntary contributions for retirement plans  | 5c.                  | \$0.00                   |                                   |                         |
| 5                    | d. Required repayments of retirement fund loans  | 5d.                  | \$0.00                   |                                   |                         |
| 5                    | e. Insurance   | 5e.                  | \$0.00                   |                                   |                         |
| 51                   | f. Domestic support obligations  | 5f.                  | \$0.00                   |                                   |                         |
| 5                    | g. <b>Union dues</b>   | 5g.                  | \$0.00                   |                                   |                         |
| 5                    | h. Other deductions. Specify:  | 5h.                  | + \$0.00                 |                                   |                         |
| 6. <b>Ac</b><br>+5h. | dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5   | e +5f + 5g 6.        | \$0.00                   |                                   |                         |
| 7. <b>C</b> a        | alculate total monthly take-home pay. Subtract line 6 from   | n line 4. 7.         | \$0.00                   |                                   |                         |
| 8. <b>Li</b> :       | st all other income regularly received:  |                      |                          |                                   |                         |
| 8:                   | a. Net income from rental property and from operating a business, profession, or farm  |                      |                          |                                   |                         |
|                      | Attach a statement for each property and business showin gross receipts, ordinary and necessary business expenses,   |                      |                          |                                   |                         |
|                      | the total monthly net income.  | 8a.                  | \$0.00                   |                                   |                         |
| 8                    | b. Interest and dividends  | 8b.                  | \$0.00                   |                                   |                         |
| 8                    | c. Family support payments that you, a non-filing spouse dependent regularly receive   |                      |                          |                                   |                         |
|                      | Include alimony, spousal support, child support, maintena divorce settlement, and property settlement.   | ance,<br>8c.         | \$0.00                   |                                   |                         |
| 8                    | d. Unemployment compensation   | 8d.                  | \$0.00                   |                                   |                         |
| 8                    | e. Social Security   | 8e.                  | \$636.67                 |                                   |                         |
| 8:                   | f. Other government assistance that you regularly received include cash assistance and the value (if known) of any not cash assistance that you receive, such as food stamps (begunder the Supplemental Nutrition Assistance Program) or housing subsidies Specify:  Food Assistance Programs Income | n-                   | \$462.00                 |                                   |                         |
| 8                    | g. Pension or retirement income  | 8g.                  | \$0.00                   |                                   |                         |
| 8                    | h. Other monthly income. Specify:  | 8h.                  | + \$0.00                 | +                                 |                         |
| 9. <b>A</b> c        | dd all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f -  | +8g + 8h. 9.         | \$1,098.67               |                                   |                         |
|                      | <b>alculate monthly income.</b> Add line 7 + line 9.<br>dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filir   | 10.<br>ng spouse     | \$1,098.67               | +                                 | = \$1,098.67            |
| In<br>fri            | State all other regular contributions to the expenses that clude contributions from an unmarried partner, members of iends or relatives.  o not include any amounts already included in lines 2-10 or  | your household, y    | our dependents, your roo | •                                 |                         |
| S                    | pecify:  |                      |                          |                                   | 11. + \$0.00            |
|                      | Add the amount in the last column of line 10 to the amount in the Summary of Schedules and Statistic.  |                      |                          |                                   | 12. \$1,098.67          |
|                      | ,  | ,                    |                          |                                   | Combined monthly income |
| 13.                  | Oo you expect an increase or decrease within the year a  | fter you file this f | orm?                     |                                   | onthy moone             |
|                      | Yes. Explain:  |                      |                          |                                   |                         |

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|                                 |   | Docc  | intent 1 age 31 of 0-                            | +                     |                                    |
|---------------------------------|---|---|--|-----------------------|------------------------------------|
| Fill in this info               | rmation to identify                             | your case:  |  |                       |                                    |
| Debtor 1                        | Georgia   |   | James  |                       |                                    |
|                                 | First Name                                      | Middle Name   | Last Name  | Check if this is:     |                                    |
| Debtor 2<br>(Spouse, if filing) | First Name                                      | Middle Name   | Last Name  | An amended fili       | ng                                 |
| Linitari Otataa                 |   |   |  | A supplement s        | howing post-petition chapter 13    |
| United States i                 | Bankruptcy Court fo                             | or the: <u>Northern</u>   | District of Illinois (State)                     |                       | the following date:                |
| Case number                     |   |   |  | MM / DD / YYY         | <del></del>                        |
| ` '                             |   |   |  | IVIIVI / DD / TTT     | ı                                  |
| <u>Official</u>                 | Form 106  | <u>5J</u>   |  |                       |                                    |
| Schedul                         | e J: Your I                                     | Expenses  |  |                       | 12/1                               |
| information. If (if known). Ans | more space is nec<br>swer every question        |   |  |                       |                                    |
|                                 | cribe Your Hou                                  | senola  |  |                       |                                    |
| 1. Is this a jo                 |   |   |  |                       |                                    |
|                                 | o to line 2                                     |   |  |                       |                                    |
| Yes. D                          | loes Debtor 2 live                              | in a separate household?  |  |                       |                                    |
|                                 | No  |   |  |                       |                                    |
|                                 | Yes. Debtor 2 m                                 | nust file Official Forms 106J-2, <i>Exper</i>                     | nses for Separate Household of Deb               | tor 2.                |                                    |
| 2. Do you hav                   | ve dependents?                                  | No  |  |                       |                                    |
| Do not list I<br>Debtor 2.      | Debtor 1 and                                    | Yes. Fill out this information for each dependent                 | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age       | Does dependent live with you?  No. |
|                                 |   |   | Child  | 17 years              | Yes.                               |
|                                 |   |   | Child  | 15 years              | No.                                |
|                                 |   |   |  |                       | Yes.                               |
| _                               | penses include<br>of people other               | <b>▼</b> No   |  |                       |                                    |
| than                            |   | Yes   |  |                       |                                    |
| yourself an<br>dependent        | -   |   |  |                       |                                    |
| Part 2: Esti                    | mate Your Ong                                   | oing Monthly Expenses   |  |                       |                                    |
| Estimate you                    | r expenses as of y                              | our bankruptcy filing date unless y                               | ou are using this form as a suppl                | ement in a Chapter 1  | 3 case to report                   |
| expenses as applicable da       |   | bankruptcy is filed. If this is a sup                             | plemental Schedule J, check the                  | box at the top of the | form and fill in the               |
|                                 |   | non-cash government assistance uded it on Schedule I: Your Income |  |                       | Your expenses                      |
|                                 | I <b>I or home owners</b> lor the ground or lot | hip expenses for your residence. In<br>t. 4.                      | clude first mortgage payments and                |                       | <b>\$261.00</b>                    |
| If not inc                      | luded in line 4:                                |   |  |                       |                                    |
| 4a. Real e                      | estate taxes                                    |   |  |                       | 4a <b>\$0.00</b>                   |
| 4b. Prope                       | erty, homeowner's,                              | or renter's insurance   |  |                       | 4b. <b>\$13.00</b>                 |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Georgia James Case number (If known)
First Name Middle Name Last Name

| i iist Naine iviidule vaine Last Naine  |            |               |
|---|------------|---------------|
|   |            | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans   | 5.         | \$0.00        |
| 6. Utilities:   |            |               |
| 6a. Electricity, heat, natural gas  | 6a.        | \$150.00      |
| 6b. Water, sewer, garbage collection  | 6b.        | \$0.00        |
| 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.        | \$115.00      |
| 6d. Other. Specify:   | 6d         | \$0.00        |
| 7. Food and housekeeping supplies   | 7.         | \$462.00      |
| 8. Childcare and children's education costs   | 8.         | \$0.00        |
| 9. Clothing, laundry, and dry cleaning  | 9.         | \$30.00       |
| 10. Personal care products and services   | 10.        | \$30.00       |
| 11. Medical and dental expenses   | 11.        | \$0.00        |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments  | 12.        | \$50.00       |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.        | \$0.00        |
| 14. Charitable contributions and religious donations  | 14.        | \$0.00        |
| 15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.   |            |               |
| 15a. Life insurance   | 15a        | \$0.00        |
| 15b. Health insurance   | 15b        | \$0.00        |
| 15c. Vehicle insurance  | 15c        | \$115.00      |
| 15d. Other insurance. Specify:  | 15d        | \$0.00        |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  |            |               |
| Specify:  | 16         | \$0.00        |
| 17. Installment or lease payments:  | 10         |               |
| 17a. Car payments for Vehicle 1   | 17a        | \$0.00        |
| 17b. Car payments for Vehicle 2   | 17b        | \$0.00        |
| 17c. Other. Specify:  | 17c        | \$0.00        |
| 17d. Other. Specify:  | 17d        | \$0.00        |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from   |            | \$0.00        |
| your pay on line 5, Schedule I, Your Income (Official Form 106I).   | 18.        |               |
| 19.Other payments you make to support others who do not live with you.  Specify:  | 10         | **            |
|   | 19.        | \$0.00        |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property | 20a        | \$0.00        |
| 20b. Real estate taxes.   | 20a<br>20b | \$0.00        |
| 20c. Property, homeowner's, or renter's insurance   | 200<br>20c | \$0.00        |
| 20d. Maintenance, repair, and upkeep expenses.  | 20d        | \$0.00        |
| 20e. Homeowner's association or condominium dues  |            |               |
| 253. Tomos a abbondator of contaminant adds   | 20e        | \$0.00        |

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| Debtor 1        | Georgi   | a                       |                            | James  | Case number (if known) |     |            |
|-----------------|--|-------------------------|----------------------------|--|------------------------|-----|------------|
|                 | First Na   | ame                     | Middle Name                | Last Name  |                        |     | _          |
| 21. <b>Othe</b> | r. Spec  | ify:                    |                            |  |                        | 21  | \$0.00     |
| 22. <b>Calc</b> | ulate y  | our monthly expense     | es.                        |  |                        |     | \$1,226.00 |
| 22a             | Add line   | es 4 through 21.        |                            |  |                        |     | \$0.00     |
| 22b.            | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 |                         |                            |  |                        |     | \$1,226.00 |
| 22c.            | Add line   | e 22a and 22b. The res  | sult is your monthly exp   | enses.   |                        | 22. |            |
| 23.Calcu        | ılate y  | our monthly net inco    | me.                        |  |                        |     |            |
| 23a.            | Copy lir   | ne 12 (your combined    | monthly income) from S     | Schedule I.  |                        | 23a | \$1,098.67 |
| 23b.            | Сору у   | our monthly expenses    | from line 22 above.        |  |                        | 23b | \$1,226.00 |
|                 |  |                         | ses from your monthly in   | ncome.   |                        |     | (\$127.33) |
|                 | The res  | sult is your monthly ne | t income.                  |  |                        | 23c |            |
| For more        | -<br>exampl  | e, do you expect to fin | ish paying for your car le | ses within the year after yoan within the year or do yo nodification to the terms of | ou expect your         |     |            |
|                 |  |                         |                            |  |                        |     |            |
|                 |  |                         |                            |  |                        |     |            |

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| Fill in this information to identify your case: |                           |             |                      |   |  |  |  |
|---|---------------------------|-------------|----------------------|---|--|--|--|
| Debtor 1  | Georgia                   |             | James                |   |  |  |  |
|   | First Name                | Middle Name | Last Name            | _ |  |  |  |
| Debtor 2  |                           |             |                      |   |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |   |  |  |  |
| United States E                                 | Sankruptcy Court for the: | Northern    | District of Illinois |   |  |  |  |
| Case number<br>(If known)                       |                           |             | (State)              | _ |  |  |  |

#### Official Form 106Dec

U.S.C. §§ 152, 1341, 1519, and 3571.

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

If two married people are filing together, both are equally responsible for supplying correct information.

12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

✓ No

✓ Yes. Name of person

✓ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

✓ /s/ Georgia James

✓ Signature of Debtor 1

Date 4/24/2018

MM/DD/YYYY

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| Fill in this              | information to identify                  | your case:                                   |  |                    |                |                  |                                   |
|---------------------------|--|--|--|--------------------|----------------|------------------|-----------------------------------|
| Debtor 1                  | Georgia                                  |  | James  |                    |                |                  |                                   |
| Debtor 1                  | First Name                               | Middle                                       | Name Last Nam  | ie                 |                |                  |                                   |
| Debtor 2<br>(Spouse, if f | iling) First Name                        | Middle                                       | Name Last Nam  | ie .               |                |                  |                                   |
| United St                 | ates Bankruptcy Court fo                 | or the: Northern                             | District of Illino   | ois                |                |                  |                                   |
| Case nun                  | nber                                     |  | (Stat  | re)                |                |                  |                                   |
| (If known)                |  |  |  |                    |                |                  | Charlet Miles                     |
| Offici                    | ial Form 107                             | 7  |  |                    |                |                  | Check if this is a amended filing |
|                           |  | <del>_</del>                                 | for Individuals  | Filing for         | Rankru         | ntcv             | 04/1                              |
| Be as co                  | mplete and accurate                      | as possible. If two r<br>needed, attach a se | narried people are filing<br>parate sheet to this form                                 | together, both     | are equally r  | esponsible for s |                                   |
| Part 1:                   | Give Details About                       | Your Marital Statu                           | s and Where You Lived  | Before             |                |                  |                                   |
| 1. Wh                     | at is your current mar                   | tal status?                                  |  |                    |                |                  |                                   |
|                           | Married                                  |  |  |                    |                |                  |                                   |
| <b>✓</b>                  | Not married                              |  |  |                    |                |                  |                                   |
| 2. Du                     | ring the last 3 years, h                 | ave you lived anywhe                         | re other than where you li   | ve now?            |                |                  |                                   |
| <b>∠</b>                  | No Yes. List all of the pla  Debtor 1:   | ces you lived in the la                      | st 3 years. Do not include of Dates Debtor 1 lived there                               | where you live no  | ow.            |                  | Dates Debtor 2 lived there        |
|                           |  |  |  | Comp. 22           | Dalata u 1     |                  | Company Dahtau 1                  |
|                           |  |  |  | Same as            | Deptor I       |                  | Same as Debtor 1                  |
|                           | 1045 N. Springfield Av<br>Number Street  | е.   | From <u>2015</u>   | Number Stree       | t              |                  | From                              |
|                           | <u>Apt. 1</u>                            |  | To <u>2016</u>   |                    |                | _                | То                                |
|                           | Chicago Illino                           |  |  | City               | Ctata          | Zin Codo         |                                   |
|                           | City State                               | e Zip Code                                   |  | City Same as       | State Debtor 1 | Zip Code         | Same as Debtor 1                  |
|                           |  |  |  |                    |                |                  |                                   |
|                           | Number Street                            | _  | From   | Number Stree       | t              |                  | From                              |
|                           |  |  | То   |                    |                |                  | To                                |
|                           | City State                               | zip Code                                     |  | City               | State          | Zip Code         |                                   |
|                           | Only Otalic                              | 219 0000                                     |  | Only               | Oldio          | 2.6 0000         |                                   |
| and                       | <i>territories</i> include Arizona<br>No | , California, Idaho, Lou                     | spouse or legal equivalent<br>isiana, Nevada, New Mexico<br>r Codebtors (Official Form | , Puerto Rico, Tex |                |                  |                                   |

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Debtor 1 Georgia James Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages. Wages. For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) \$1,386.00 Est. YTD LINK From January 1 of current year until Est. YTD SSI \$1,910.01 the date you filed for bankruptcy: Est. 2017 LINK \$3,336.00 For last calendar year: Est. 2017 SSI \$7,640.04 (January 1 to December 31, 2017 Est. 2016 LINK \$3,240.00 For the calendar year before that: Est. 2016 SSI \$6,312.00 (January 1 to December 31, 2016

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Debtor 1 Georgia James Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment State City Suppliers or Zip Code vendors

Other

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| r 1        | Georgia                                   |  |   | Ja  | mes                                       | Case number                                    | (if known)   |
|------------|---|--|---|---|---|--|--|
|            | First Name                                |  | Middle Name   | Las                                       | t Name                                    |  |  |
| nsi<br>orp | ders include your r<br>porations of which | elatives; a<br>you are a<br>or a busin | ny general partner<br>n officer, director,<br>ess you operate a | s; relatives of any<br>person in control, | general partners; pa<br>or owner of 20% o | tnerships of which y<br>r more of their voting | who was an insider?  you are a general partner; g securities; and any managing r domestic support obligations, |
| <b>✓</b>   | No  |  |   |   |   |  |  |
| $\Box$     | Yes. List all payr                        | nents to a                             | an insider.   |   |   |  |  |
|            |   |  |   | Dates of payment                          | Total amount paid                         | Amount you still owe                           | Reason for this payment  |
|            | Insider's Name                            |  |   |   |   |  |  |
|            | Number Street                             |  |   |   |   |  |  |
| _          | City                                      | State                                  | Zip Code  |   |   |  |  |
|            | Insider's Name                            |  |   |   |   |  |  |
|            | Number Street                             |  |   |   |   |  |  |
|            | City                                      | State                                  | Zip Code  |   |   |  |  |
| insi       | der?<br>ude payments on o                 | debts gua                              |   | ed by an insider.                         | Total amount paid                         | Amount you still owe                           | n account of a debt that benefited an Reason for this payment  |
|            |   |  |   | paymont                                   | paid                                      | ouiii owo                                      | Include creditor's name  |
|            | Insider's Name                            |  |   | -   |   |  |  |
|            | Number Street                             |  |   |   |   |  |  |
|            | City                                      | State                                  | Zip Code  |   |   |  |  |
|            | Insider's Name                            |  |   |   |   |  |  |
|            | Number Street                             |  |   |   |   |  |  |
|            |   |  |   |   |   |  |  |
|            | City                                      | State                                  | Zip Code  |   |   |  |  |

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Debtor 1 Georgia James Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Georgia  | James                       | Case number (if known)                        |                     |
|------|--|-----------------------------|---|---------------------|
|      | First Name Middle Name                                 | Last Name                   |   |                     |
| 11.  | accounts or refuse to make a payment because you       |                             | ank or financial institution, set off any amo | unts from your      |
|      | ✓ No ☐ Yes. Fill in the details.                       |                             |   |                     |
|      |  | Describe the action the     | creditor took Date action was taken           | Amount              |
|      | Creditor's Name  |                             |   |                     |
|      | Number Street  |                             |   |                     |
|      |  | Last 4 digits of account n  | umber: XXXX-                                  |                     |
|      | City State Zip Code                                    |                             |   |                     |
| 12.  | Within 1 year before you filed for bankruptcy, was an  |                             | possession of an assignee for the benefit of  | creditors, a court- |
|      | appointed receiver, a custodian, or another official?  |                             |   |                     |
|      | ✓ No  Yes  |                             |   |                     |
| Part | t 5: List Certain Gifts and Contributions              |                             |   |                     |
| 13.  | Within 2 years before you filed for bankruptcy, did y  | ou give any gifts with a to | stal value of more than \$600 per person?     |                     |
|      | No Yes. Fill in the details for each gift.             |                             |   |                     |
|      | Gifts with a total value of more than \$600 per person | Describe the gifts          | Dates you gave the gifts                      | Value               |
|      |  |                             |   |                     |
|      | Person to Whom You Gave the Gift                       |                             |   |                     |
|      | Number Street  |                             |   |                     |
|      | City State Zip Code                                    |                             |   |                     |
|      | Person's relationship to you                           |                             |   |                     |
|      | Person to Whom You Gave the Gift                       |                             |   | ·                   |
|      | - 55011 to Whom You dave the dift                      |                             |   |                     |
|      | Number Street  |                             |   |                     |
|      | City State Zip Code                                    |                             |   |                     |
|      | Person's relationship to you                           |                             |   |                     |

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| ebtor 1  | Georgia   |  | James Case numb  | ber (if known)                                |                     |
|----------|---|--|--|---|---------------------|
|          | First Name  | Middle Name  | Last Name  |   |                     |
| \A/:+    | hin 2 years hafara yay  | filed for bankruptov, did  | Lyou give any gifts or contributions with a total  | al value of mare than \$600                   | to any charity?     |
| . Wit    | nin 2 years before you  | filed for bankruptcy, did  | l you give any gifts or contributions with a tota  | ai value of more than \$600                   | to any charity?     |
| <b>✓</b> | No  |  |  |   |                     |
| П        | Yes. Fill in the details  | for each gift or contributi  | on.  |   |                     |
|          |   | -  |  | Doto was                                      | Value               |
|          | Gifts or contributions that total more than   |  | Describe what you contributed  | Date you contributed                          | Value               |
|          | that total more than  | φ000   |  | Contributed                                   |                     |
|          |   |  |  |   |                     |
|          | Charity's Name  |  |  |   |                     |
|          |   |  | _  |   |                     |
|          |   |  |  |   |                     |
|          | Number Street   |  | -  |   |                     |
|          |   |  |  |   |                     |
|          | City Sta  | te Zip Code  |  |   |                     |
|          |   |  |  | <del></del>                                   |                     |
| rt 6:    | List Certain Losses   | •  |  |   |                     |
|          |   |  |  |   |                     |
| Wit      | hin 1 year before you f   | iled for bankruptcy or si  | nce you filed for bankruptcy, did you lose anyt  | thing because of theft, fire,                 | other disaster, or  |
| gar      | nbling?   |  |  |   |                     |
|          | No  |  |  |   |                     |
| 믬        |   |  |  |   |                     |
| ✓        | Yes. Fill in the details.   |  |  |   |                     |
|          | Describe the propert  |  | Describe any insurance coverage for the  |   | Value of property   |
|          | how the loss occurre  | d  | Include the amount that insurance has paid.  |   | lost                |
|          |   |  | pending insurance claims on line 33 of Sche  | edule   |                     |
|          |   |  | A/B: Property.   |   |                     |
|          | 2017 Hyundai Tucson   | - Theft  |  | 01/2018                                       | \$27637.00          |
|          |   |  |  |   |                     |
|          | List Cautain Day  | uto ou Tuomofouo   |  |   |                     |
| Wit      | out seeking bankruptcy  | iled for bankruptcy, did y<br>y or preparing a bankrup   |  |   | anyone you consulte |
| . Wit    | hin 1 year before you f<br>out seeking bankruptc  | iled for bankruptcy, did y<br>y or preparing a bankrup   |  |   | anyone you consulte |
| . Wit    | hin 1 year before you fout seeking bankrupto;<br>ude any attomeys, bank<br>No   | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition?  |   | anyone you consulte |
| . Wit    | hin 1 year before you f<br>out seeking bankruptcy<br>ude any attomeys, bank   | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required  | in your bankruptcy.                           |                     |
| . Wit    | hin 1 year before you fout seeking bankrupto;<br>ude any attomeys, bank<br>No   | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required or credit counseling agencies for credit counseling a | in your bankruptcy.  Date payment             | Amount of           |
| . Wit    | hin 1 year before you fout seeking bankrupto;<br>ude any attomeys, bank<br>No   | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required  | in your bankruptcy.  Date payment or transfer |                     |
| . Wit    | hin 1 year before you fout seeking bankruptcy<br>ude any attomeys, bank<br>No<br>Yes. Fill in the details.  | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| Wit      | hin 1 year before you fout seeking bankrupton<br>ude any attomeys, bank<br>No<br>Yes. Fill in the details.  | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required or credit counseling agencies for credit counseling a | in your bankruptcy.  Date payment or transfer | Amount of           |
| . Wit    | hin 1 year before you fout seeking bankrupton<br>ude any attorneys, bank<br>No<br>Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid  | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| Wit      | hin 1 year before you fout seeking bankruptoude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street  | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| Wit      | hin 1 year before you fout seeking bankruptcy ude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street  | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street  | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor   | iled for bankruptcy, did y<br>y or preparing a bankrup   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor   | iled for bankruptcy, did y<br>y or preparing a bankrup<br>ruptcy petition preparers, c   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin   | iled for bankruptcy, did y<br>y or preparing a bankrup<br>ruptcy petition preparers, c   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| Wit      | hin 1 year before you fout seeking bankruptcy ude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City Sta  | iled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second consistency of the second consistence of the second consistence of the second consistence of the second consistency of the  | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illin City Sta  | riled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second state of the second seco | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptcy ude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City Sta  | riled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second state of the second seco | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illin City Sta  | riled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second state of the second seco | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illin City Sta  | riled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second state of the second seco | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptcy ude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City Sta  Email or website addre None Person Who Made the   | riled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second state of the second seco | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illin City Sta  Email or website addre None Person Who Made the   | riled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second state of the second seco | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptcy ude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City Sta  Email or website addre None Person Who Made the   | riled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second state of the second seco | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptcy ude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City Sta  Email or website addre None Person Who Made the   | riled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistence of the second state of the second seco | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City State Email or website addret None Person Who Made the Person Who Was Paid Number Street   | iled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistency of the second state of the second secon | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptcy ude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City Sta  Email or website addre None Person Who Made the   | iled for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consistency of the second state of the second secon | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankruptoude any attorneys, bank No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City State Email or website addret None Person Who Made the Person Who Was Paid Number Street   | illed for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consists 60603 atte Zip Code sess  Payment, if Not You   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |
| . Wit    | hin 1 year before you fout seeking bankrupton ude any attorneys, bank No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illin City State Email or website addres None Person Who Made the Person Who Was Paid Number Street  City State City State City Street | illed for bankruptcy, did y or preparing a bankrup ruptcy petition preparers, consists 60603 atte Zip Code sess  Payment, if Not You   | tcy petition? or credit counseling agencies for services required Description and value of any property transferred  | Date payment or transfer was made             | Amount of payment   |

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| Debto  | or 1 Georgia  | James Case  | e number <i>(if known</i> )                                       |                                   |
|--------|---|---|---|-----------------------------------|
|        | First Name Middle Name  | Last Name   |   |                                   |
| ı      | Within 1 year before you filed for bankruptcy, did help you deal with your creditors or to make pay Do not include any payment or transfer that you lister  | ments to your creditors?                                | f pay or transfer any property to a                               | anyone who promised to            |
|        | No Yes. Fill in the details.  |   |   |                                   |
| •      | _   | Description and value of any prope transferred          | payment or transfer was made                                      | Amount of payment                 |
|        | Person Who Was Paid   | -   |   |                                   |
|        | Number Street   | _   |   |                                   |
|        | City State Zip Code   | _   |   |                                   |
| t<br>I | Within 2 years before you filed for bankruptcy, di the ordinary course of your business or financial Include both outright transfers and transfers made as and transfers that you have already listed on this state  No Yes. Fill in the details. | affairs? s security (such as the granting of a security |   |                                   |
| -      |   | Description and value of property transferred           | Describe any property or payments received or debts p in exchange | Date<br>paid transfer was<br>made |
|        | Person Who Received Transfer  | _   |   |                                   |
|        | Number Street   | _   |   |                                   |
|        | City State Zip Code Person's relationship to you  | _   |   |                                   |
|        | Person Who Received Transfer  | _   |   |                                   |
|        | Number Street   | _   |   |                                   |
|        | City State Zip Code<br>Person's relationship to you   | _   |   |                                   |
|        | Within 10 years before you filed for bankruptcy, obeneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.   | lid you transfer any property to a self-set             | tled trust or similar device of whi                               | ich you are a                     |
|        | 103. Fill til die details.  | Description and value of the propo                      | erty transferred  | Date<br>transfer was<br>made      |
|        | Name of trust   |   |   |                                   |

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Debtor 1 Georgia James Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred COMENITY BANK/ASHSTWRT XXXX-Checking 03/2018 \$ 0.00 Person Who Was Paid Savings PO BOX 182789 Number Street Money market Brokerage COLUMBUS Ohio 43218 Other City State Zip Code WEBBNK/FHUT XXXX-Checking 2017 \$ 0.00 Person Who Was Paid Savings Po Box 166 Number Street Money market Brokerage 07101 Newark New Jersey Other City State Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? Name of Financial Institution Yes Number Street Number Street City State Zip Code City State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Storage Facility Name Yes Number Street Number Street City State Zip Code City State Zip Code

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Debtor 1 Georgia James Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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| Deb  |      | Georgia                    |   |  | James   | Cas  | se number <i>(ii</i> | fknown)   |                      |
|------|------|----------------------------|---|--|---|--|----------------------|---|----------------------|
|      |      | First Name                 |   | fiddle Name  | Last Name   |  |                      |   |                      |
| 26.  | Hav  |                            | y in any judici   | al or administr  | rative proceeding und   | der any environmer   | ntal law? In         | nclude settlements and ord                      | lers.                |
|      |      | No<br>Yes. Fill in the det | ails.   |  |   |  |                      |   |                      |
|      |      | O 4 <sup>12</sup> 1-       |   |  | Court or agency   |  | Nature               | of the case                                     | Status of the case   |
|      |      | Case title                 |   |  | Court Name  |  |                      |   | Pending              |
|      |      | Case number                |   |  | NumberStreet  |  |                      |   | On appeal  Concluded |
|      |      | •                          |   |  | City State  | Zip Code   |                      |   |                      |
| Pari | 11:  | Give Details Ab            | out Your B  | usiness or Co  | onnections to Any   | Business   |                      |   |                      |
| 27.  | With | A sole propri              | etor or self-en<br>a limited liabi<br>a partnership<br>rector, or mar<br>at least 5% of<br>bove applies | nployed in a tra<br>lity company (L<br>aging executiv<br>the voting or e<br>Go to Part 12. | ade, profession, or ot<br>LC) or limited liability<br>we of a corporation<br>equity securities of a c | her activity, either f<br>partnership (LLP)<br>corporation | _                    | connections to any busines                      | s?                   |
|      | Ш    |                            |   |  |   | ature of the busine  | ess                  | Employer Identification                         | number Do not        |
|      |      |                            |   |  | 200020 10 1.  |  |                      | include Social Security                         |                      |
|      |      | Business Name              |   |  | _   |  |                      | EIN:  |                      |
|      |      | Number Street              |   |  | Name of accou   | ıntant or bookkeep   | per                  | Dates business existed                          |                      |
|      |      | City                       | State   | Zip Code   |   |  |                      | From To   |                      |
|      |      |                            |   |  | Describe the n  | ature of the busine  | ess                  | Employer Identification include Social Security |                      |
|      |      | Business Name              |   |  | _   |  |                      | EIN:  |                      |
|      |      | Number Street              |   |  | Name of accou   | ıntant or bookkeep   | per                  | Dates business existed                          |                      |
|      |      | City                       | State   | Zip Code   |   |  |                      | FromTo  |                      |
|      |      |                            |   |  | Describe the n  | ature of the busine  | ess                  | Employer Identification include Social Security |                      |
|      |      | Business Name              |   |  | _   |  |                      | EIN:  |                      |
|      |      | Number Street              |   |  | Name of accou   | ıntant or bookkeep   | per                  | Dates business existed                          |                      |
|      |      | City                       | State   | Zip Code   | _   |  |                      | From To   |                      |
|      |      |                            |   |  |   |  |                      |   |                      |

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| Debtor 1 | Georgia  |                         | James  | Case number (if known)   |
|----------|--|-------------------------|--|--|
|          | First Name   | Middle Name             | Last Name  |  |
|          | thin 2 years before you filed feditors, or other parties.  No Yes. Fill in the details below |                         | ı give a financial statement   | to anyone about your business? Include all financial institutions,   |
| _        | •  |                         | Date issued  |  |
|          |  |                         | Dato locada  |  |
|          | Name   |                         | MM/DD/YYYY   |  |
|          |  |                         |  |  |
|          | Number Street  |                         |  |  |
|          |  |                         |  |  |
|          | City State   | Zip Code                |  |  |
| Part 12  | Sign Below   |                         |  |  |
| true     | and correct. I understand th   | at making a false state | ement, concea <sup>l</sup> ing property<br>r imprisonment for up to 20 | ts, and I declare under penalty of perjury that the answers are , or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|          | /s/ Georgia Ja   |                         |  | ·  |
|          | Signature of Debt  | tor 1                   |  | Signature of Debtor 2  |
|          | Date 4/24/2018   |                         |  | Date   |
| Did      | you attach additional pages t<br>No<br>Yes<br>you pay or agree to pay some                   |                         |  | als Filing for Bankruptcy (Official Form 107)?   |
| /        | No   |                         |  |  |

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| otor 1 | Georgia                        |                |                 | James                            | Case number (if known)          |  |  |
|--------|--------------------------------|----------------|-----------------|----------------------------------|---------------------------------|--|--|
|        | First Name                     |                | Middle Name     | Last Name                        | <del></del>                     |  |  |
|        | Additional Pa                  | ge             |                 |                                  |                                 |  |  |
|        | າ 1 year before ງ<br>nsferred? | ou filed for b | ankruptcy, were | any financial accounts or instru | iments held in your name, or fo | or your benefit, clos  | sed, sold, move                                  |
|        |                                |                |                 | Last 4 digits of account number  | Type of account or instrument   | Date<br>account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before<br>closing or<br>transfer |
|        | COMENITYBAN                    |                | <u> </u>        | - XXXX-                          | Checking                        | 2017   | \$ 0.00  |
|        | Person Who Wa                  | s Paid         |                 |                                  | <b>–</b>                        |  | Ψ 0.00   |
|        | 4590 E BROAD                   | ST             |                 | <u>-</u>                         | Savings                         |  |  |
|        | Number Street                  |                |                 |                                  | Money market                    |  |  |
|        | COLUMBUS                       | Ohio           | 43213           |                                  | Brokerage                       |  |  |
|        | City                           | State          | Zip Code        |                                  | ✓ Other                         |  |  |
|        |                                |                |                 | Last 4 digits of account number  | Type of account or instrument   | Date<br>account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before<br>closing or<br>transfer |
|        | COMENITY BAN                   |                |                 | XXXX-                            | Checking                        | 02/18  | \$ 0.00  |
|        | Person Who Wa                  | s Paid         |                 |                                  | _                               | 02,.0  | <del>+ 0.00</del>                                |
|        | PO BOX 2974                    |                |                 |                                  | Savings                         |  |  |
|        | Number Street                  |                |                 |                                  | Money market                    |  |  |
|        | Mission                        | Kansas         | 66201           |                                  | ☐ Brokerage                     |  |  |

Brokerage

Other

City

Zip Code

State

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| Fill in this information to identify your case: |            |             |                      |  |  |
|---|------------|-------------|----------------------|--|--|
| Debtor 1  | Georgia    | James       |                      |  |  |
|   | First Name | Middle Name | Last Name            |  |  |
| Debtor 2  |            |             |                      |  |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name            |  |  |
| United States Bankruptcy Court for the:         |            | Northern    | District of Illinois |  |  |
| Case number<br>(If known)                       |            |             | (State)              |  |  |

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. |  |   |  |  |  |  |
|----|---|--|---|--|--|--|--|
|    | Identify the creditor and the property that is collateral   | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C? |  |  |  |  |
|    | Creditor's name: HYUNDAI CAPITAL AMERIC  Description of property securing debt: 2017 Hyundai Tucson   | Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and            | ✓ No.<br>Yes.                                       |  |  |  |  |
|    | Creditor's name: TD AUTO FINANCE  Description of property securing debt: 2010 Buick Lacrosse  | Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]: | No.<br>✓ Yes.                                       |  |  |  |  |
|    | Creditor's name:  Description of property securing debt:  | Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]: | No. Yes.  |  |  |  |  |
|    | Creditor's name:  Description of property securing debt:  | Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and            | No. Yes.  |  |  |  |  |

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| Debtor  | r Georgia                   |                                   | James                  | Case number (if  |   |
|---------|-----------------------------|-----------------------------------|------------------------|--|---|
| 1       | First Name                  | Middle Name                       | Last Name              | known)   | _ |
| Part 2: | List Your Unexpir           | red Personal Property Leas        | es                     |  |   |
|         | -                           |                                   |                        | y Contracts and Unexpired Leases (Official Form 106G), fill in the |   |
|         |                             |                                   |                        | are still in effect; the lease period has not yet ended. You may   |   |
|         |                             | nal property lease if the trustee |                        |  |   |
|         |                             |                                   |                        |  |   |
| De      | scribe your unexpired       | d personal property leases        |                        | Will the lease be assumed?   |   |
|         |                             |                                   |                        |  |   |
|         |                             |                                   |                        | ☐ No   |   |
| Les     | ssor's name:                |                                   |                        | Yes  |   |
|         |                             |                                   |                        |  |   |
|         | scription of leased         |                                   |                        |  |   |
| pro     | operty:                     |                                   |                        |  |   |
|         |                             |                                   |                        | □ No   |   |
| Les     | ssor's name:                |                                   |                        | No   |   |
|         |                             |                                   |                        | Yes  |   |
| De      | scription of leased         |                                   |                        |  |   |
|         | perty:                      |                                   |                        |  |   |
|         |                             |                                   |                        |  |   |
| l e     | ssor's name:                |                                   |                        | ☐ No   |   |
|         | ocor o marrio.              |                                   |                        | Yes  |   |
| Do      | agrication of lagged        |                                   |                        |  |   |
|         | scription of leased operty: |                                   |                        |  |   |
| J-1-5   |                             |                                   |                        |  |   |
|         |                             |                                   |                        | □ No   |   |
| Les     | ssor's name:                |                                   |                        | Yes  |   |
|         |                             |                                   |                        |  |   |
|         | scription of leased         |                                   |                        |  |   |
| pro     | operty:                     |                                   |                        |  |   |
|         |                             |                                   |                        | □ No   |   |
| Les     | ssor's name:                |                                   |                        | No   |   |
| _       |                             |                                   |                        | Yes  |   |
| De      | scription of leased         |                                   |                        |  |   |
| pro     | operty:                     |                                   |                        |  |   |
|         |                             |                                   |                        |  |   |
| Les     | ssor's name:                |                                   |                        | ☐ No   |   |
|         |                             |                                   |                        | Yes  |   |
| De      | scription of leased         |                                   |                        | _  |   |
|         | operty:                     |                                   |                        |  |   |
|         |                             |                                   |                        |  |   |
| Lo      | ssor's name:                |                                   |                        | ☐ No   |   |
| Le      | SSOI S Haine.               |                                   |                        | ☐ Yes  |   |
|         |                             |                                   |                        | <b>-</b>   |   |
|         | scription of leased operty: |                                   |                        |  |   |
| ρ. σ    | , po.t., .                  |                                   |                        |  |   |
| Dowl-0- | Sign Below                  |                                   |                        |  |   |
| art 3:  | SIGIT DETOW                 |                                   |                        |  |   |
| Und     | er penalty of perjury.      | I declare that I have indicated   | my intention about any | property of my estate that secures a debt and any personal         |   |
|         |                             | o an unexpired lease.             | •                      | -  |   |
|         |                             |                                   |                        |  |   |
| ×       | /s/ Georgia James           |                                   | ×                      |  |   |
|         | Signature of Debtor 1       |                                   |                        | gnature of Debtor 2  |   |
|         |                             |                                   | -                      |  |   |
|         | Date 4/24/2018              |                                   | Da                     |  |   |
|         | MM/DD/YYYY                  |                                   |                        | MM/DD/YYYY   |   |

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| <b>r</b> 0 | Casaria James  | Northern Distric                |   |                                 |
|------------|--|---------------------------------|---|---------------------------------|
| re_        | Georgia James  Debtor  | <del></del>                     | Case No.  | (If known)                      |
|            | 2000.  |                                 | Chapter   | Chapter 7                       |
|            | DISCLOSURE OF  | COMPENSATIO                     | N OF ATTORNEY F   | OR DEBTOR                       |
| 1          | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the p | petition in bankruptcy, or agreed to  | be paid to me, for services     |
|            | For legal services, I have agreed to ac  | cept                            |   | \$1,250.00                      |
|            | Prior to the filing of this statement I  | nave received                   |   | \$0.00                          |
|            | Balance Due  |                                 |   | \$1,250.00                      |
| 2          | . The source of the compensation paid  | I to me was:                    |   |                                 |
|            | <b>✓</b> Debtor  | Other (specify)                 |   |                                 |
| 3          | . The source of the compensation paid  | I to me is:                     |   |                                 |
|            | <b>✓</b> Debtor  | Other (specify)                 |   |                                 |
| 4          | I have not agreed to share the ab  |                                 | n with any other person unless they   | <i>i</i> are                    |
|            |  | v firm. A copy of the agreeme   | th a other person or persons who a<br>ent, together with a list of the name |                                 |
| 5          | . In return for the above-disclosed fee,   | I have agreed to render legal   | I service for all aspects of the bankr                                      | ruptcy case, including:         |
|            | <ul> <li>a. Analysis of the debtor's finan<br/>bankruptcy;</li> </ul>  | cial situation, and rendering   | advice to the debtor in determining   | y whether to file a petition in |
|            | b. Preparation and filing of any   | petition, schedules, statemer   | nts of affairs and plan which may be  | e required;                     |
|            | c. Representation of the debtor  | at the meeting of creditors a   | nd confirmation hearing, and any a  | djourned hearings thereof;      |
| 6          | . By agreement with the debtor(s), the   | above-disclosed fee does no     | ot include the following services:  |                                 |
|            |  |                                 |   |                                 |
|            |  | CERTIFICA                       | ATION   |                                 |
|            | I certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.                               | e statement of any agreemer     | nt or arrangement for payment to m  | e for representation of the     |
|            | 4/24/2018  |                                 | /s/ Jeremy Nevel  |                                 |
|            | Date   |                                 | Signature of Attorney   |                                 |
|            |  |                                 | Semrad Law Firm   |                                 |
|            |  |                                 | Name of law firm  | _                               |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1.717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   |       | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re: James, Georgia                                     |           | Case No.  | Case No.                            |  |  |  |
|---|-----------|---|-------------------------------------|--|--|--|
|   | Debtor(s) |   |                                     |  |  |  |
|   |           | Chapter.  | Chapter7                            |  |  |  |
|   | VERIF     | ICATION OF CREDITOR MAT                         | RIX                                 |  |  |  |
| The above named Debtors hereby verify that the knowledge. |           | rify that the attached list of creditors is tru | ue and correct to the best of their |  |  |  |
| Date:   | 4/24/2018 | /s/ James, Georg                                | ia                                  |  |  |  |
|   |           | James, Georgia<br><i>Signature of Deb</i>       | tor                                 |  |  |  |

HYUNDAI CAPITAL AMERIC 10550 TALBERT AVE FOUNTAIN VALLEY, CA, 92708

TD AUTO FINANCE PO BOX 9223 FARMINGTON HILLS, MI, 48333

PNC BANK, N.A. Po Box 8807 Dayton, OH, 45401

COMENITY BANK/CARSONS 1314 PINELOG ROAD AIKEN, SC, 29803

CBNA Po Box 6497 Sioux Falls, SD, 57117

COMENITY BANK/ASHSTWRT PO BOX 182789 COLUMBUS, OH, 43218

## CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,250.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filling of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 04/274/2018

Client

Attorney <sub>-</sub>

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| Debtor 1 Georgia First Name   | Jan<br>Middle Name Last  | nes Cas   | e number (if known)  |  |  |  |
|---|--|---|--|--|--|--|
|   | estions for Reporting Purposes   | ( Name  |  |  |  |  |
| 16. What kind of debts do<br>you have?  | 16a Ara vour debte primarily consumer debte? Consumer debte are defined in 11 U.S.C. 8.101(9) on   |   |  |  |  |  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. I am not filing under Chapter 7.  ✓ Yes. I am filing under Chapter 7. expenses are paid that fund No. ✓ Yes.   | . Do you estimate that after a  |  |  |  |  |
| 18. How many creditors<br>do you estimate that<br>you owe?  | ☑ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 1,000-5,000<br>5,001-10,000<br>10,001-25,000                                    |  | 25,001-50,000<br>  50,001-100,000<br>  More than 100,000   |  |  |
| 19. How much do you estimate your assets to be worth?   |  | \$1,000,001-\$10<br>\$10,000,001-\$50<br>\$50,000,001-\$10<br>\$100,000,001-\$3 | 0 million  | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |  |  |
| <sup>20.</sup> How much do you<br>estimate your<br>liabilities to be?   |  | \$1,000,001-\$10<br>\$10,000,001-\$50<br>\$50,000,001-\$10<br>\$100,000,001-\$8 | 0 million 00 million 0 | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |  |  |
| Part 7: Sign Below  |  |   |  |  |  |  |
| For you   | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 1 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy-çase can result in fines up to \$250,000, or imprisonment for up to 20 years, or |   |  |  |  |  |
|   | both. 18 U.S.C. §§ 152, 1341, 15  /s/ Georgia James Signature of Debtor 1  Executed on 4/24/2018  MM / DD / N  | 19, and 3571.   | Signature of Debtor Executed on  |  |  |  |

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| Fill in this infor   |   |  |   |   |
|--|---|--|---|---|
|  | mation to identify your o   | ase:   |   |   |
| Debtor 1   | Georgia<br>First Name   | Middle Name  | James Loot Name   |   |
| Debtor 2   |   | ivildale Name  | Last Name   |   |
| (Spouse, if filing)  | First Name  | Middle Name  | Last Name   |   |
| United States E  | Bankruptcy Court for the:   | Northern   | District of Illinois  |   |
| Case number<br>(If known)  |   |  | (State)   |   |
| Official   | Form 106De  | ec   |   | Check if this is a amended filing   |
| Declarat   | ion About an  | Individual Deb   | tor's Schedules   | 12/1  |
|  |   |  |   |   |
| You must file t  | his form whenever you   | file bankruptcy schedules                              |   | false statement, concealing property, or obtaining  |
| You must file to<br>money or prope   | his form whenever you<br>erty by fraud in connect<br>1341, 1519, and 3571.          | file bankruptcy schedules                              | or amended schedules. Making a  |   |
| You must file the money or property U.S.C. §§ 152,                         | his form whenever you<br>erty by fraud in connect<br>1341, 1519, and 3571.<br>Below | file bankruptcy schedules<br>tion with a bankruptcy ca | or amended schedules. Making a  | false statement, concealing property, or obtaining<br>00, or imprisonment for up to 20 years, or both. 18     |
| You must file the money or property U.S.C. §§ 152,                         | his form whenever you<br>erty by fraud in connect<br>1341, 1519, and 3571.<br>Below | file bankruptcy schedules<br>tion with a bankruptcy ca | or amended schedules. Making a<br>se can result in fines up to \$250,0  | false statement, concealing property, or obtaining<br>00, or imprisonment for up to 20 years, or both. 18     |
| You must file the money or proper U.S.C. §§ 152,  Part 1: Sign  Did you pa | his form whenever you<br>erty by fraud in connect<br>1341, 1519, and 3571.<br>Below | file bankruptcy schedules<br>tion with a bankruptcy ca | or amended schedules. Making a<br>se can result in fines up to \$250,0<br>ney to help you fill out bankruptcy | false statement, concealing property, or obtaining 00, or imprisonment for up to 20 years, or both. 18 forms? |

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

MM/DD/YYYY

Date 4/24/2018

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| Debtor 1 | 1 Georgia                                      |   |                    | James                      | Case number (if known)   |
|----------|--|---|--------------------|----------------------------|--|
|          | First Name                                     |   | Middle Name        | Last Name                  |  |
|          | thin 2 years before y<br>editors, or other par |   | oankruptcy, did ye | ou give a financial state  | ment to anyone about your business? Include all financial institutions                               |
| 덛        | No<br>Yes. Fill in the deta                    | ails below.                                       |                    |                            |  |
| I        |  |   |                    | Date issued                |  |
|          |  |   |                    |                            |  |
|          | Name   |   |                    | MM/DD/YYYY                 | _  |
|          | Number Street                                  |   |                    | _                          |  |
|          | City   | State   | Zip Code           |                            |  |
|          | <b>-</b> ,                                     |   | <u> </u>           |                            |  |
| Part 12: | Sign Below                                     |   |                    |                            |  |
| a ba     | <b>x</b> /s/ G                                 | esult in fines<br>Georgia James<br>re of Debtor 1 |                    | 11 0                       | to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   Signature of Debtor 2  Date          |
|          | Date 4/  | /24/2018  | L                  |                            | Date   |
| Did      | vou attach additiona                           | I nages to Y                                      | our Statement of   | Financial Affairs for Ind  | ividuals Filing for Bankruptcy (Official Form 107)?  |
|          |  | pagos to .  | our otatoment or   | Timenolal Allano loi liik  | Madaio : iiiig ioi saiiii apioy (o iiiolai y o iiii 100).  |
| 뜨        | No<br>Yes                                      |   |                    |                            |  |
| Did y    | you pay or agree to p                          | pay someone                                       | who is not an at   | torney to help you fill ou | it bankruptcy forms?   |
|          | No   |   |                    |                            |  |
|          | Yes. Name of person                            |   |                    |                            | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119). |

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| Debto            | r Georgia                                      |   | James   | Case number (if  |
|------------------|--|---|---|--|
| 1                | First Name                                     | Middle Name   | Last Name                                       | known)   |
| Part 2:          | List Your Unexpi                               | red Personal Property Lease   | es  |  |
| For an<br>inform | y unexpired personal<br>ation below. Do not li | property lease that you listed in   | Schedule G: Executory<br>leases are leases that | Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).  |
| De               | escribe your unexpire                          | d personal property leases  |   | Will the lease be assumed?   |
| Le               | essor's name:                                  |   |   | ☐ No   |
|                  |  |   |   | Yes  |
|                  | escription of leased operty:                   |   |   |  |
| Le               | essor's name:                                  |   |   | □ No □ Yes   |
|                  | escription of leased operty:                   |   |   |  |
| Le               | essor's name:                                  |   |   | □ No<br>□ Yes  |
|                  | escription of leased operty:                   |   |   | <b>–</b>   |
| Le               | essor's name:                                  |   |   | □ No<br>□ Yes  |
|                  | escription of leased operty:                   |   |   | _  |
| Le               | essor's name:                                  |   |   | □ No<br>□ Yes  |
|                  | escription of leased operty:                   |   |   |  |
| Le               | essor's name:                                  |   |   | □ No<br>□ Yes  |
|                  | escription of leased operty:                   |   |   |  |
| Le               | essor's name:                                  |   |   | □ No<br>□ Yes  |
|                  | escription of leased operty:                   |   |   |  |
| Part 3:          | Sign Below                                     | Nicka Bereg Malaya (1969) iya alba ya Kenaman a masayen masaya iya a sani i Persa |   | anten (), anno protesto e la compacta de la compactación de la compact |
| Und              | ler penalty of perjury,                        | I declare that I have indicated i   | my intention about any                          | property of my estate that secures a debt and any personal   |
|                  | /s/ Georgia James                              | A losed 27  | ×   |  |
| _                | Signature of Debtor 1                          | W / / /   | Sig   | nature of Debtor 2   |
| [                | Date 4/24/2018<br>MM/DD/YYYY                   |   | Dat   | e<br>MM/DD/YYYY  |

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:        | James, Georgia | Case No                                       |                                    |
|---------------|----------------|---|------------------------------------|
|               | Debtor(s)      | Chapter.                                      | Chapter7                           |
|               | VERIFI         | CATION OF CREDITOR MAT                        | RIX                                |
| T<br>knowledg |                | fy that the attached list of creditors is tru | e and correct to the best of their |
| Date:         | 4/24/2018      | /s/ James, Georgi                             | ia Des I/v                         |
|               |                | James, Georgia<br>Signature of Debt           | or ) )                             |

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| Debtor 1                 | Georgia<br>First Name                            | Middle Name   | James<br>Last Name                           | Case number                  | (if known)                                 |  |                              |
|--------------------------|--|---|--|------------------------------|--|--|------------------------------|
|                          | r ii St Naille                                   | Wildle Marie  | Last Name                                    | Column A<br>Debtor 1         |  | Column B Debtor 2 or non-filing spouse |                              |
| Do no                    |  | ation<br>you contend that the amou<br>ct. Instead, list it here:  |  | \$0.00                       |  |  |                              |
| •                        | our spouse                                       |   | \$636.67<br>\$0.00                           |                              |  |  |                              |
| 9.Pensi                  |  | come. Do not include any arcurity Act.  | mount received that was a                    | \$0.00                       |  |  |                              |
| amou<br>payme<br>interna | nt. Do not include an<br>ents received as a vict | purces not listed above. Sp<br>y benefits received under the<br>im of a war crime, a crime a<br>rrorism. If necessary, list oth<br>w. | e Social Security Act or gainst humanity, or |                              |  |  |                              |
| Other                    | Government Assistar                              | nce   |  | \$462.00                     |  |  |                              |
| Total a                  | amounts from separa                              | te pages, if any.   |  | +\$0.00                      | , r  | +                                      | <b>-</b>                     |
| 11. Calc                 | culate your total cu                             | rrent monthly income. Add   | l lines 2 through 10 for                     | \$462.00                     | +  |  | \$462.00                     |
| each<br>colu             | mn. Then add the to                              | tal for Column A to the total   | for Column B.                                |                              | ] [  |  |                              |
|                          |  |   |  |                              |  |  | Total current monthly income |
| Part 2:                  | Determine Whetl                                  | ner the Means Test Ap   | plies to You                                 |                              |  |  | -                            |
|                          | -  | nonthly income for the yea<br>it monthly income from line   | •  |                              | Copy line                                  | e 11 here →                            | \$462.00                     |
|                          |  | umber of months in a year).<br>ual income for this part of th   | e form.                                      |                              |  | 12b.                                   | X 12                         |
| 13 Calcu                 | late the median fan                              | nily income that applies to   | you. Follow these steps:                     |                              |  |  |                              |
| Fill in t                | the state in which you                           | ı live.   | Illinois                                     |                              |  |  |                              |
| Fill in 1                | the number of people                             | in your household.  | 3  |                              |  |  |                              |
| Fill in t<br>house       |  | ome for your state and size   | of   |                              |  | 13.                                    | \$80,233.00                  |
| instruc                  | tions for this form. T                           | nedian income amounts, go<br>his list may also be available   |  |                              |  |  |                              |
|                          | do the lines compai<br>—                         |   |  |                              |  |  |                              |
| 14a.                     | Line 12b is less the Go to Part 3.               | nan or equal to line 13. On t   | he top of page 1, check bo                   | x 1, There is no presumpti   | on of abu                                  | se.                                    |                              |
| 14b.                     | Line 12b is more<br>Go to Part 3 and             | than line 13. On the top of I<br>fill out Form 122A-2.  | page 1, check box 2, The p                   | presumption of abuse is de   | termined                                   | by Form 122A-2.                        |                              |
| Part 3:                  | Sign Below                                       |   |  |                              |  |  |                              |
| Dusi                     | anina hara I daalara                             | under sonalty of new un, that   | the information on this state                | toment and in any attachm    | anto io tri                                | io and correct                         |                              |
| Dy Si                    | gilling frere, i declare i                       | under penalty of perjury that   | the information on this sta                  | mement and in any attachm    | ents is tru                                | re and correct.                        |                              |
|                          | /s/ Georgia James                                | Neep  | Ky s   | Signature of Debtor 2        |  |  | _                            |
|                          |  | 1 /   | /  | ·                            |  |  |                              |
| D                        | ate 4/24/2018<br>MM/DD/YYYY                      |   |  | Date 4/24/2018<br>MM/DD/YYYY |  |  |                              |
| •                        | ·  | do NOT fill out or file Form<br>fill out Form 122A-2 and fil  |  |                              | ene, 1 · · · · · · · · · · · · · · · · · · |  |                              |